CANNON R HOWARD

Form 4

March 05, 2009

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer

subject to Section 16. Form 4 or Form 5

obligations

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

30(h) of the Investment Company Act of 1940

1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person * **CANNON R HOWARD**

(First)

(State)

(Middle)

(Zip)

Symbol

BUCKEYE TECHNOLOGIES INC [BKI]

2. Issuer Name and Ticker or Trading

(Month/Day/Year) 03/05/2009

3. Date of Earliest Transaction

_X__ Director

Issuer

10% Owner _ Other (specify Officer (give title

(Check all applicable)

5. Relationship of Reporting Person(s) to

OMB APPROVAL

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

BUCKEYE TECHNOLOGIES INC., 1001 TILLMAN STREET

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

MEMPHIS, TN 38112

| (City) | (State) | Table | e I - Non-D | erivative | Securi | ities Acq | quired, Disposed (| of, or Beneficial | lly Owned |
|------------------------|--------------------------------------|------------------|------------------|---------------------|--------|----------------------------|-------------------------|---------------------------|-----------------------|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | | 3. Transactio | 4. Securi | | • | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect |
| (Instr. 3) | • | any | Code | • | | Beneficially | (D) or | Beneficial | |
| | | (Month/Day/Year) | (Instr. 8) | (Instr. 3, 4 and 5) | | | Owned | Indirect (I) | Ownership |
| | | | | | | | Following | (Instr. 4) | (Instr. 4) |
| | | | | (A) | | Reported Transaction(s) | | | |
| | | | | | or | | (Instr. 3 and 4) | | |
| ~ | | | Code V | Amount | (D) | Price | (| | |
| Common Stock | 03/05/2009 | | P | 6,000 | A | \$ 1.95 | 258,988 | D | |
| Common Stock | 03/05/2009 | | P | 6,000 | A | \$ 1.96 | 264,988 | D | |
| Common Stock | | | | | | | 301,442 | I | By Trust |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(9-02)

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displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative | 2. | 3. Transaction Date (Month/Day/Year) | | 4. | 5. onNumber | 6. Date Exerc | | 7. Titl | | 8. Price of Derivative | 9. Nu Deriv |
|------------------------|---|--------------------------------------|----------------------|-----------------|----------------|---------------------|--------------------|----------------|--|------------------------|---|
| Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Tear) | any (Month/Day/Year) | Code (Instr. 8) | of | | | Under Secur | rlying | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CANNON R HOWARD BUCKEYE TECHNOLOGIES INC. 1001 TILLMAN STREET MEMPHIS, TN 38112

X

Signatures

R. Howard Cannon 03/05/2009

**Signature of Date
Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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