

# VULCAN MATERIALS CO Reported by KOROLOGOS ANN MCLAUGHLIN

### FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 10/14/08 for the Period Ending 10/10/08

Address 1200 URBAN CENTER DRIVE

BIRMINGHAM, AL 35242

Telephone 2052983000

CIK 0001396009

Symbol VMC

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2. 1	2. Issuer Name <b>and</b> Ticker or Trading Symbol						ng Symb		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
KOROLOGOS ANN MCLAUGHLIN				Vı	Vulcan Materials CO [ VMC ]						C ]	<b>X</b> Dir	ector		10% (	Owner
(Last)	(First)	(Midd	le)	3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)					below) Office	er (give title	below) _	Other	specify		
1200 URBAN CENTER DRIVE					10/10/2008											
(Street)											ed		6. Individual or Joint/Group Filing (Check Applicable Line)			
BIRMINGHA	M, AL	35242										V Form	filed by One	Donorting Do	wa o n	
(City) (State) (Zip)												_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table I	- Non-D	eriva	tiv	e Securi	ties	s Acqui	rec	d, Dispos	sed of, o	or Beneficial	ly Owned	I		
			2. Tran Date			Co (In	Code (Instr. 8) I		Securities equired (A) sposed of (I str. 3, 4 and (A) or	or Foli D) (Ins		ant of Securities Beneficially Owneding Reported Transaction(s) and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
Tabl	le II - Dei	rivative S	ecuritie	s Ben	efi	cially O				nount (D)		ants, option	s, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Date Deemed Execution Date, if		4. Trans. Code (Instr. 8)	rans. Derivative Securities Acquired (A)			and Expiration Date Securities Ur Derivative Securities 1 (Instr. 3 and 4)				Security	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial	
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares		Transaction (s) (Instr. 4)	4)	
Phantom Stock (Deferred Compensation)	(1)	10/10/2008		A (2)		69.36		(3)		(3)	Common Stock	69.36	\$72.09	17382.36	D	
Phantom Stock (Deferred Compensation)	(1)	10/11/2008		A (2)		228.68		(3)		(3)	Common Stock	228.68	\$71.06	17611.04	D	

#### **Explanation of Responses:**

- (1) Convertible on a 1-for-1 basis.
- (2) Director's fees credited to the reporting person's account in accordance with the Vulcan Materials Company Directors' Deferred Compensation Plan.
- (3) The units are to be settled in Vulcan common stock commencing at the retirement of the reporting person.

**Reporting Owners** 

Paparting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KOROLOGOS ANN MCLAUGHLIN						
	X					
1200 URBAN CENTER DRIVE						

BIRMINGHAM, AL 35242				
Signatures				
By: Amy M. Tucker, Attorney-in-Fact	10/13/2008			
** C' C D D	Date			

\*\* Signature of Reporting Person

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

- \* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.