SECURITIES AND EXCHANGE COMMISSION

FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2005-05-02** | Period of Report: **2005-04-28** SEC Accession No. 0000025793-05-000025

(HTML Version on secdatabase.com)

ISSUER

OS:		

CIK:25793| IRS No.: 050126220 | State of Incorp.:RI | Fiscal Year End: 1231 SIC: 3950 Pens, pencils & other artists' materials

SIC: 3950 Pens, pencils & other artists materials

Mailing Address ONE ALBION ROAD LINCOLN RI 02865

Business Address ONE ALBION RD LINCOLN RI 02865 4013331200

REPORTING OWNER

COONEY EDWARD J

CIK:1286856

Type: 4 | Act: 34 | File No.: 001-06720 | Film No.: 05789398

Business Address ONE ALBION ROAD LINCOLN RI 02865 401-274-2000

FORM 4

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

OMB APPROVAL										
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(h) of the Investment Company Act of 1940

COONEY EDW	lame and Address of Reporting Person * OONEY EDWARD J (Last) (First) (Middle)		2. Issuer Name and Ticker or Trading Symbol CROSS A T CO [ATX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/28/2005	below)				
	(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 Person				
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)	2. Transaction Date (Month/ Day/Year)	2A. Deemed Execution Date, if any (Month/ Day/Year)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned	Ownership	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	

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

(c.g., pate, cane, warrante, optione, convertible cocarnice												<i></i>			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/ Day/Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Transa Code (Instr. 8		5. Num of Derivat Securiti Acquire (A) or Dispose (D) (Ins 4, and	ive ies ed ed of etr. 3,	and Expiration Date (Month/Day/Year)		of Securities Underlying Derivative Security		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	٧	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Phantom Stock Units	(1)	04/28/2005		<u>A</u>		1,225		(2)	(2)	Class A Common Stock	1,225	\$5.1	1,225	D	

Explanation of Responses:

- 1. Conversion is 1 for 1.
- 2. These phantom stock units relate to a director compensation program that mandates that a portion of the directors' compensation be paid in Class A Common Stock. The Reporting Person has deferred receipt of the value of the phantom stock units until retirement from the Board. These stock units reflect payment of second quarter compensation.

Signatures

Tina C. Benik, Attorney-in-Fact for Edward J. Cooney

05/02/2005

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 Number.