HONEYFIELD DAVID W

Form 4

January 08, 2010

FORM 4

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

OMB Number:

Expires:

response...

3235-0287 January 31,

2005

0.5

Check this box if no longer

subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per

OMB APPROVAL

Form 4 or Form 5

obligations may continue. See Instruction

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

1(b).

Common

Stock

01/07/2010

(Print or Type Responses)

1. Name and Address of Reporting Person * HONEYFIELD DAVID W			2. Issuer Symbol	Name and	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
			Intrepid	Potash, I	nc. [IPI]	(Check all applicable)				
(Last)	(First) (Middle)	3. Date of Earliest Transaction				• •			
			(Month/D	ay/Year)		Director	10%	Owner		
707 17TH STREET, SUITE 4200			01/07/20	010		X Officer (give title Other (specify below) Exec. VP/CFO/Treas./Sec.				
					Exec. VI/CI O/IIcas./GCC.					
(Street)			4. If Amer	ndment, Da	te Original	6. Individual or Joint/Group Filing(Check				
		Filed(Mon	th/Day/Year)		Applicable Line)					
					X Form filed by One Reporting Person					
DENVER, C					Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table	e I - Non-D	erivative Securities Acq	quired, Disposed of, or Beneficially Owned				
1.Title of	2. Transaction Da	e 2A. Dee	emed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year	Executi	Execution Date, if		Transaction(A) or Disposed of		Form: Direct	Indirect		
(Instr. 3)		any		Code	(D)	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				
					(A)	Transaction(s)				

Code V Amount

1,250

 $S^{(1)}$

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

(Instr. 3 and 4)

D

 $27,791 \frac{(2)}{}$

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

or

(D)

D

Price

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	1
	Derivative				Securities	3		(Instr.	3 and 4)		- 1
	Security				Acquired						1
					(A) or						
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						2	2		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HONEYFIELD DAVID W 707 17TH STREET, SUITE 4200 DENVER, CO 80202

Exec. VP/CFO/Treas./Sec.

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Signatures

/s/ Geoffrey T. Williams, Jr., as attorney-in-fact

01/08/2010 Date

**Signature of 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).
- (1) The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 sales plan adopted by the reporting person on November 13, 2009.
- (2) Represents 13,133 unrestricted, vested shares of common stock and 14,658 shares of restricted, unvested shares of common stock.

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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