SHEFFIELD KATHY I

Form 4 May 26, 2010

FORM 4

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

OMB APPROVAL

Check this box

OMB 3235-0287 Number:

if no longer subject to Section 16.

January 31, Expires: 2005

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

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations

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).

(Print or Type Responses)

may continue.

See Instruction

1. Name and Address of Reporting Person * SHEFFIELD KATHY I			2. Issuer Name and Ticker or Trading Symbol AAON INC [AAON]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First) ((Middle)	3. Date of Earliest Transaction			(Check an approach)		
`			(Month/Da 05/25/20	•		Director 10% OwnerX Officer (give title Other (specify below) Vice President and Treasurer		
	(Street)		4. If Amen	dment, Dat	e Original	6. Individual or .	Joint/Group Filii	ng(Check
OWASSO, OK 74055 (City) (State) (Zip)			Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person quired, Disposed of, or Beneficially Owned		
(233)	(2)	(F)	Table	: I - Non-Do	erivative Securities Acc	quirea, Disposea	of, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	e) Execution any	med on Date, if Day/Year)	3. Transaction Code (Instr. 8)	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)

Stock, par 1,500 D value \$.004

Common

Common 401(k) Stock, par 8.271 Ι Plan value \$.004

or

Code V Amount (D) Price

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)

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$\label{thm:convertible} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

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. Transaction Code (Instr. 8)	of Derivative Securities Acquired		e	7. Title and A Underlying S (Instr. 3 and	Securities	8. Pr Deri Secu (Inst
					(A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 9.68					02/21/2004	02/21/2013	Common Stock	15,000	
Stock Option	\$ 10.82					04/06/2006	04/06/2015	Common Stock	7,500	
Stock Option	\$ 18.43					05/08/2007	05/08/2016	Common Stock	15,000	
Stock Option	\$ 16.96					03/10/2009	03/10/2018	Common Stock	3,000	
Stock Option	\$ 15.31					03/09/2010	03/09/2019	Common Stock	5,000	
Stock Option	\$ 23.27	05/25/2010		A	1	05/25/2011	05/25/2020	Common Stock	10,000	(

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	

SHEFFIELD KATHY I 10402 NORTH 144 EAST AVENUE OWASSO, OK 74055

Vice President and Treasurer

Signatures

Kathy I. Sheffield	05/25/2010
**Signature of Reporting Person	Date

Reporting Owners 2

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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.