## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(11mt of 1y	pe Response	s)											
Name and Address of Reporting Person * Schaeffer Darin				2. Issuer Name and Ticker or Trading Symbol PATRICK INDUSTRIES INC [PATK]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) P.O. BOX 638			3. Date of Earliest Transaction (Month/Day/Year) 06/16/2009					X Officer (give title below) Other (specify below) Principal Accounting Officer					
(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					
	RT, IN 465									ed by More than	one reporting	Cison	
(City	<sup>7</sup> )	(State)	(Zip)	Ta	ble I - Nor	-Derivati	e Securitie	Acqu	ired, Disp	osed of, or l	Beneficially (	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	(A)	4. Securities Acquired (A) or Disposed of (I (Instr. 3, 4 and 5)		Beneficia Reported	t of Securities ly Owned Following Transaction(s)		6. Ownership Form:	Beneficial
				(Month/Day/Year)	Code	V Am	(A) or (D)	Price	(Instr. 3 a	str. 3 and 4)		\ /	Ownership (Instr. 4)
			06/16/2009		P	10,	000 A	\$ 0.55	12 110			D	
Reminder:	Report on a s	separate line for	r each class of secur	rities beneficially ov		Persons containe	who respo	rm are	e not requ		spond unle	ss	1474 (9-02)
Reminder:	Report on a s	separate line fo	Table II - 1	Derivative Securiti	es Acquire	Persons containe the form	who respond in this food in this food is plays and of, or Be	rm are curre neficial	not requesting ntly valid	uired to res OMB con		ss	1474 (9-02)
1. Title of		3. Transaction	Table II - 1  a 3A. Deemed Execution Da any	Derivative Securitive.g., puts, calls, was te, if Transaction Code Year) (Instr. 8)	ies Acquire arrants, op 5.	Persons containe the form	who respond in this for displays a set of, or Benerible secutorisable atton Date any/Year)	rm are curre  neficial arities)  7. T Ame Und Secu (Ins. 4)	not requesting ntly valid	8. Price of Derivative Security (Instr. 5)	spond unle	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natur of Indire Benefici Ownersl (Instr. 4)

#### **Reporting Owners**

D 4 0 N 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Schaeffer Darin P.O. BOX 638 ELKHART, IN 46515			Principal Accounting Officer				

# **Signatures**

Darin R. Schaeffer by Andy L. Nemeth, attorney-in-fact	06/17/2009
**Signature of Reporting Person	Date

### **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.