

Means Samuel M. III  
 Form 4  
 February 07, 2011

**FORM 4**

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

OMB APPROVAL

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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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Means Samuel M. III

2. Issuer Name and Ticker or Trading Symbol  
 PACCAR INC [PCAR]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
 777 106TH AVENUE NE  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 02/03/2011

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
 Vice President

BELLEVUE, WA 98004

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 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)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership Indirect Beneficial Ownership (Instr. 4)		
				(A) or (D)	Code	V	Amount	(D)	Price

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

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SEC 1474 (9-02)

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

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)
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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
<u>STOCK OPTION (1)</u>	\$ 12.54							01/01/2005	01/23/2012	COMMON STOCK	17,254
<u>STOCK OPTION (1)</u>	\$ 13.96							01/01/2006	01/15/2013	COMMON STOCK	18,064
<u>STOCK OPTION (1)</u>	\$ 25.31							01/01/2007	01/15/2014	COMMON STOCK	8,187
<u>STOCK OPTION (1)</u>	\$ 32.11							01/01/2008	01/20/2015	COMMON STOCK	7,690
<u>STOCK OPTION (1)</u>	\$ 32.23							01/01/2009	01/26/2016	COMMON STOCK	7,861
<u>STOCK OPTION (1)</u>	\$ 44.56							01/01/2010	01/31/2017	COMMON STOCK	7,371
<u>STOCK OPTION (1)</u>	\$ 45.74							01/01/2011	01/30/2018	COMMON STOCK	7,000
<u>STOCK OPTION (1)</u>	\$ 30.81							01/01/2012	02/06/2019	COMMON STOCK	8,428
<u>STOCK OPTION (1)</u>	\$ 36.12							01/01/2013	02/02/2020	COMMON STOCK	9,444
<u>STOCK OPTION (1)</u>	\$ 50.5	02/03/2011		A <sup>(1)</sup>		6,798		01/01/2014	02/03/2021	COMMON STOCK	6,798

## Reporting Owners

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

Means Samuel M. III  
777 106TH AVENUE NE  
BELLEVUE, WA 98004

Vice President

## Signatures

Samuel Means by David C. Anderson  
POA

02/07/2011

\_\_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).

(1) Option to buy awarded under PACCAR Long Term Incentive Plan (LTIP).

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.