### NCI BUILDING SYSTEMS INC

Form 4

September 26, 2005

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB APPROVAL			
							OMB Number:	3235-0287		
Check the if no long	rer		-					Expires:	January 31, 2005	
subject to Section 1 Form 4 o	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated average burden hours per response 0.5		
Form 5 obligation may cont See Instru	inue. Section 17(a	suant to Section (a) of the Public U (30(h) of the In	Itility Holo	ding Con	npany	Act of	1935 or Section	1		
(Print or Type I	Responses)									
1. Name and A LAWRENC	r Name <b>and</b> Ticker or Trading  JILDING SYSTEMS INC				5. Relationship of Reporting Person(s) to Issuer					
1]							(Check all applicable)			
(Month/			Date of Earliest Transaction  Month/Day/Year)  2/22/2005				Director 10% Owner Officer (give title Other (specify below)			
PARKWAY		1011 (1912212	2003				V.P.	& Controller		
HOUSTON	endment, Date Original nth/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) Tab	ole I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Month/Day/Year) Execution Date any (Month/Day/Y			2d 3. 4. Securities Acquired Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported	Indirect (I)		
					(A) or		Transaction(s)			
Common			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Stock, \$0.01 par value	09/22/2005		S	1,000	D	\$ 38.3	1,000	D		
Common Stock, \$0.01 par value	09/22/2005		S	1,000	D	\$ 38.35	0	D		
Common Stock, \$0.01 par							440	I	By NCI 401(k) Plan (1)	

#### Edgar Filing: NCI BUILDING SYSTEMS INC - Form 4

value

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

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 control number.

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 (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. Transactic Code (Instr. 8)	5. Number omf Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options to Purchase Common Stock	\$ 20.64	09/22/2005		M	487	(2)	12/14/2012	Common Stock, \$0.01 par value	487
Options to Purchase Common Stock	\$ 18.12	09/22/2005		M	1,104	(2)	06/15/2013	Common Stock, \$0.01 par value	1,104
Options to Purchase Common Stock	\$ 24.44	09/22/2005		M	409	(2)	12/14/2013	Common Stock, \$0.01 par value	409

# **Reporting Owners**

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

LAWRENCE WILLIAM A 10943 NORTH SAM HOUSTON PARKWAY WEST HOUSTON, TX 77064

V.P. & Controller

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## **Signatures**

William 09/26/2005 Lawrence

\*\*Signature of
Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Holdings under 401(k) plan are reported based on the plan statement provided as of September 23, 2005.
- (2) Generally, the options vest in four equal annual installments beginning on the first anniversary of the grant date. Under a letter agreement dated September 15, 2005, Mr. Lawrence and the Company have agreed that the options will cease vesting on October 28, 2005.

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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