FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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

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1. Name and Address of Reporting Person* DAVIS SUSAN F (Last) (First) (Middle) 1900 WEST LOOP SOUTH			2. Issuer Name and Ticker or Trading Symbol QUANEX CORP [NX]								(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
				3. Date of Earliest Transaction (Month/Day/Year) 06/30/2006								Officer below)	(give title	Other (spe below)		specify		
SUITE 1	500				4.	If Ame	endment, I	Date	of Original File	ed (N	Month/Da	v/Year)	6. li	ndividual or J	oint/Group	Filing	(Check App	licable
(Street) HOUSTON TX 77027				, 222 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3								Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	State)	(Zip)	,														
		Та	ble I - Nor	n-Deriv	ativ	ve Se	ecuritie	s Ac	quired, D	isp	osed c	f, or Be	neficiall	y Owned				
Date				action 2A. Deem Execution if any (Month/Da		n Date	Transaction D Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Beneficia Owned F	s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	<i>'</i>	Amount	(A) o (D)	r Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)
									uired, Dis s, options	-			-	Owned				
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/Yes	Code (ection Instr.	Derivative		6. Date Exercisab Expiration Date (Month/Day/Year)		of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	e s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
				Co	ode	v	(A)	(D)	Date Exercisable	Ex Da	piration te	Title	Amount or Number of Shares		Transaction (Instr. 4)	on(s)		
Phantom Stock Units ⁽¹⁾	\$0 ⁽²⁾	06/30/2006		1	A		46.2314		(3)		(3)	Common Stock	46.2314	\$43.07	16,655.0	092	D	
Stock Options (Right to buy)	\$15.7955								10/31/2002	10/	/31/2012	Common Stock	4,500		4,500)	D	
Stock Options (Right to buy)	\$17.8								10/31/2003	10/	/31/2013	Common Stock	4,500		4,500)	D	
Stock Options (Right to buy)	\$22.5333								10/31/2004	10/	/31/2014	Common Stock	4,500		4,500)	D	
Stock Options (Right to buy)	\$38.6067								10/31/2005	10/	/31/2015	Common Stock	3,042		3,042	2	D	

Explanation of Responses:

- 1. Units that are credited to the participant's account under the Ouanex Corporation Deferred Compensation Plan as a result of Dividend Reinvestment.
- 3. All units credited under the Deferred Compensation Plan are 100% vested at all times; provided, however, that if a participant receives a benefit from the Deferred Compensation Plan for any reason other than death, disability or retirement within three years after a deferral is credited to a participant's account, any matching awards made by the Company with respect to such deferral will be forfeited. Distributions under the Deferred Compensation Plan are made beginning on a specified date selected bythe participant or upon a participant's death, disability, or termination of employment.

John J. Mannion, Power of **Attorney**

07/03/2006

** Signature of Reporting Person

Date

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

- * 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.

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 Number.