April 13, 2010 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549 OMB Number: **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: **SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response... 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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement TERRA INDUSTRIES INC [TRA] Nocchiero Anthony J (Month/Day/Year) 04/05/2010 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year)

C/O CF INDUSTRIES HOLDINGS, INC.,Â4 PARKWAY NORTH, SUITE 400

Nocchiero Anthony J

Form 3

(Street)

DEERFIELD, ILÂ 60015

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(City)	(State)	(Zip)	Table I - Non-Deriv	ative Securit	ies Benefi
1.Title of Secu (Instr. 4)	rity		2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature o Ownership (Instr. 5)
Reminder: Rep owned directly	-		lass of securities beneficially	SEC 1473 (7-02	2)
			d to the collection of d in this form are not		

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currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

OMB APPROVAL

3235-0104 January 31, 2005 Estimated average burden hours per 0.5

__X__Officer _ Other (give title below) (specify below) Vice President

X Director

(Check all applicable)

6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One **Reporting Person**

ficially Owned

p

10% Owner

of Indirect Beneficial

1

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships			
		Director	10% Owner	Officer	Other
Nocchiero Anthony J C/O CF INDUSTRIES HOLDINGS, INC. 4 PARKWAY NORTH, SUITE 400 DEERFIELD, IL 60015		ÂX	Â	Vice President	Â
Signatures					
/s/ Anthony J. Nocchiero	04/05/2010				
**Signature of Reporting	Date				

Explanation of Responses:

No securities are beneficially owned

Person

- * If the form is filed by more than one reporting person, *see* Instruction 5(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.