VALSPAR CORP

Form 5 December 14, 2015

FORM 5

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

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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January 31,

**OMB** 

Number:

Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported Form 4 30(h) of the Investment Company Act of 1940

Transactions Reported

1. Name and Address of Reporting Person * HECKES HOWARD C			2. Issuer Name <b>and</b> Ticker or Trading Symbol VALSPAR CORP [VAL]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (1	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 10/30/2015			led	(Check all applicable)  Director 10% OwnerX_ Officer (give title Other (specify					
P.O. BOX 1	461							below) Exec	below) utive Vice Pres	ident		
				If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Reporting  (check applicable line)				
MINNEAP(	OLIS, MN 55	440						_X_ Form Filed b Form Filed b Person	y One Reporting y More than One			
(City)	(State)	(Zip)	Tabl	e I - Non-Der	ivative Sec	curitie	es Acqu	iired, Disposed	of, or Benefici	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transaction Code (Instr. 8)	4. Securit Acquired Disposed (Instr. 3,	(A) of (D) 4 and (A) or	) 5)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common stock	Â	Â		Â	Amount Â	(D) Â	Price Â	47,107	D	Â		
Common stock	10/30/2015	Â		J	114	A	\$ <u>(1)</u>	2,087	I	Savings and Retirement Plan		
	oort on a separate line ficially owned direct			contained i	n this for	m are	not r	Illection of inf equired to res alid OMB cont	pond unless	SEC 2270 (9-02)		

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

	<ol> <li>Title of</li> </ol>	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	ınt of	Derivative
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)
		Derivative				Securities			(Instr.	3 and 4)	
		Security				Acquired					
						(A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
										Amount	
							_			or	
						Date	Expiration	Title	Number		
							Exercisable I	Date		of	
						(A) (D)				Shares	

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#### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HECKES HOWARD C P.O. BOX 1461 MINNEAPOLIS, MN 55440	Â	Â	Executive Vice President	Â			

### **Signatures**

/s/ Tim Beastrom, by Power of
Attorney

\*\*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) Vested shares in Valspar Savings and Retirement Plan as of allocation date 10/30/15.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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