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Quinn Francis	D										
Form 4											
March 12, 201	2										
FORM	4	D статр	C CECUDI	TIEC AN	ID EVC	TT A N		MARGEON		PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this	box		vv asi	inigton, i	J.C. 205	49				January 31,	
if no longe	r						Expires:	2005			
subject to Section 16	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average				
Form 4 or		SECUKITIES						burden hours per response 0.5			
Form 5	Filed r	oursuant to	Section 16	(a) of the	Securitie	es Ex	change	Act of 1934,	16500156	0.5	
obligations	Section 1						•	1935 or Section	L		
may contin See Instruc	ue.) of the Inv	•	· ·						
1(b).	tion				1.0						
(Print or Type Re	sponses)										
1 Name and Ad	drass of Doporti	ng Darson *						Delationship of l	Doporting Dors	on(s) to	
Original English D				Name and 7	licker or 1	rading	>	5. Relationship of Reporting Person(s) to Issuer			
Quini i funci			Symbol AZZ INC								
(*))		A 6 1 1 1						(Check	all applicable)	
(Last)	(First)	(Middle)	3. Date of H		nsaction			D. (100	0	
ONE MUSEU	IM PLACE	SUITE	(Month/Day 03/09/202	-			-	Director _X Officer (give t		Owner er (specify	
500, 3100 WI			03/09/20	12				pelow)	below)		
500, 5100 11	201 / 111 011							Vic	e President		
	(Street)		4. If Amend		e Original			5. Individual or Joi	nt/Group Filin	g(Check	
			Filed(Month	n/Day/Year)				Applicable Line) _X_ Form filed by O	no Poporting Do	r 00 n	
FORT WORT	ГН ТХ 7610 [°]	7					-	Form filed by M			
FORT WOR	III, IA 7010	1]	Person			
(City)	(State)	(Zip)	Table	I - Non-De	rivative S	ecurit	ies Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction	Date 2A. D	eemed	3.	4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Y		tion Date, if		on(A) or D	-		Securities	Ownership	Indirect	
(Instr. 3)		any (Mont	h/Dou/Voor)	Code	(Instr. 3,	4 and	5)	Beneficially Owned	Form:	Beneficial Ownership	
		(INIOIII	h/Day/Year)	(Instr. 8)				Following	Direct (D) or Indirect	(Instr. 4)	
						(A)		Reported	(I)		
						or		Transaction(s)	(Instr. 4)		
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
COMMON	03/09/2012			М	942	А	\$	2,280	D		
STOCK (1)	00,09,2012			1,1	2.2	11	51.34	2,200	D		
COMMON	02/00/2012			D	200	D	\$	1 09 4	D		
STOCK (2)	03/09/2012			D	296	D	51.34	1,984	D		

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

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 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. Transacti Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
FB	Director	10% Owner	Officer	Other			
Quinn Francis D ONE MUSEUM PLACE, SUITE 500 3100 WEST 7TH STREET FORT WORTH, TX 76107			Vice President				
Signatures							

DANA PERRY	03/12/2012
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**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) Upon the vesting of restricted stock units on March 1, 2012 granted to the reporting person on March 1, 2009, the reporting person received 942 shares of common stock on March 9, 2012.
- (2) Of the 942 shares of common stock received on March 9, 2012, the reporting person disposed of 296 shares of common stock on March 9, 2012 to satisfy tax withholding obligations.

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.