Edgar Filing: MASSARO ANTHONY A - Form 4

MASSARO	ANTHONY A	A										
Form 4												
November 27	7, 2017											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL					
UNITED STATES SECURITIES AND EACHANGE COMMISSION								OMB	3235-0287			
Check thi	Check this box Washington, D.C. 20549						Number: Expires:	January 31,				
if no longer STATEMENT OF C				ICES IN 1	RENEE	СТА		NERSHIPOE	2005			
subject to Section 1		CHANGES IN BENEFICIAL OWNERSHIP OI SECURITIES						Estimated average				
Form 4 or		Sheer				burden hours per response 0.						
Form 5						e Act of 1934,	10000100	0.0				
obligation may cont		17(a) of the	Public U	tility Hold	ling Con	npany	y Act of	f 1935 or Section	n			
See Instru		30(h)) of the In	vestment	Compan	y Ac	t of 194	40				
1(b).												
(Print or Type F	Pagmangag)											
(I lint of Type I	(cesponses)											
1. Name and Address of Reporting Person [*] _2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Person(s) to					
MASSARO	Symbol				-6	Issuer						
			-	ERCIAL	METAL	S CC)					
			[CMC]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	f Earliest Tr	ansaction			Director	10%	Owner		
			(Month/E	ay/Year)				Officer (give title Other (specify below)				
	CARTHUR I	BLVD,	11/22/2	017				below)	Delow)			
SUITE 800												
	(Street)			ndment, Da	te Origina	1		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
J			Filed(Mor	nth/Day/Year)							
IRVING, T	X 75030								fore than One Re			
	A 73039							Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction I		3.	4. Securi		•	5. Amount of	6. Ownership				
Security (Instr. 3)	(Month/Day/Ye		on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Securities Beneficially	Form: Direct Indirect (D) or Beneficial	Indirect Beneficial		
(IIISU. <i>3</i>)		any (Month/	Day/Year)	(Instr. 8)	(111501. 5,	4 anu	5)	-	· · /	Ownership		
			•					Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Code V	A	or	Duiters	(Instr. 3 and 4)				
Common				Code V			Price \$					
Stock	11/22/2017			А	129 <u>(1)</u>	А	φ 19.01	60,703	D			

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.

 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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	. ,	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

10% Owner Officer

Other

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Reporting Owners

Reporting Owner Name / Address

MASSARO ANTHONY A 6565 N. MACARTHUR BLVD, SUITE 800 IRVING, TX 75039

Signatures

By: Danna K. Cary For: Anthony A. Massaro

11/27/2017

Date

Director

**Signature of Reporting Person

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) Represents dividend equivalents deemed deferred into additional restricted stock units that are fully vested and are distributable in shares of common stock following termination of service as a Director of the Company, in accordance with the applicable distribution election.

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.