AZZ INC Form 3 October 28, 2014 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL

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(Print or Type Responses)

Statement	 Date of Event Requiring Statement (Month/Day/Year) 		3. Issuer Name and Ticker or Trading Symbol AZZ INC [AZZ]				
liddle) 10/27/2014		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
SUITE		(Checl Directo X Officer (give title belo	k all applicable) r 10% r Other w) (specify belo	Owner r ow)	6. Individual or Joint/Group Filing(Check Applicable Line)		
5107		¥1,110		\$	_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
Zip)	Table I - N	Non-Deriva	tive Securiti	ies Be	neficially Owned		
			3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	1		
ine for each class of secur	rities benefic	ially s	SEC 1473 (7-02	2)			
on contained in this for o respond unless the	orm are not e form displ	t					
	Statement (Month/Day/Y iddle) 10/27/2014 SUITE 5107 Zip) ne for each class of secu who respond to the co on contained in this fo	Statement (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) Table I - N 2. Amount o Beneficially (Instr. 4) ne for each class of securities benefic who respond to the collection of on contained in this form are not	Statement AZZ INC e (Month/Day/Year) iddle) 10/27/2014 4. Relationsh Person(s) to SUITE (Check Directo Directo Officer (give title below VP, Hu 5107 Zip) Table I - Non-Deriva 2. Amount of Securities Beneficially Owned (Instr. 4) ne for each class of securities beneficially who respond to the collection of or respond unless the form displays a	Statement AZZ INC [AZZ] (Month/Day/Year) AZZ INC [AZZ] iddle) 10/27/2014 4. Relationship of Reporting Person(s) to Issuer SUITE (Check all applicable) SUITE (Check all applicable) Image: Suite of the person of the p	Statement AZZ INC [AZZ] AZZ INC [AZZ] AZZ INC [AZZ] iddle) 10/27/2014 4. Relationship of Reporting Person(s) to Issuer SUITE (Check all applicable)		

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

1. Title of Derivative Security (Instr. 4)			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

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Shares	or Indirect
	(I)
	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
F	Director	10% Owner	Officer	Other		
Forester Debbie Romine ONE MUSEUM PLACE, SUITE 500 3100 WEST 7TH STREET FORT WORTH, TX 76107	Â	Â	VP, Human Resources	Â		
Signatures						
/s/ Tara D. Mackey, attorney-in-fact for Debbie Romine Forester			10/28/2014			
<u>**</u> Signature of Reporting Person			Date			

Explanation of Responses:

No securities are beneficially owned

- * 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.