Edgar Filing: AZZ INC - Form 4

AZZ INC Form 4 July 12, 2017											
FORM	4					a a		OMB AF	PROVAL		
	UNITEDSI	FATES SECUR Wasl	TIES AN nington, I			GE C	OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 Eiled pursuant to Section 16(a) of the Security								Expires:January 31, 2005Estimated average burden hours per response0.5			
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type Re	sponses)										
1. Name and Address of Reporting Person 2. Issuer N JOYCE KEVERN R Symbol AZZ INC			ame and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Mid		3. Date of Earliest Transaction				(Check all applicable)				
ONE MUSEUM PLACE, 3100 07/11/201 WEST 7TH STREET				isaction			X_ Director10% Owner Officer (give titleOther (specify below) below)				
(Street) 4. If Amend			dment, Date	ment, Date Original			6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person _FORT WORTH, TX 76107 — Form filed by More than One Reporting Person											
(City)	(State) (Zi	^{ip)} Table	I - Non-Dei	rivative Se	curiti	es Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	3. 4. Securities , if TransactionAcquired (A) or Code Disposed of (D) ear) (Instr. 8) (Instr. 3, 4 and 5) (A) or)) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial			
COMMON STOCK	07/11/2017		Code V A	Amount 2,040	(D) A	Price \$ 0	59,473	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)

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

Reporting Owners

Reporting Owner Name / Address	Relationships								
I O	Director	10% Owner	Officer	Other					
JOYCE KEVERN R									
ONE MUSEUM PLACE	х								
3100 WEST 7TH STREET	Λ								
FORT WORTH, TX 76107									
Signatures									
/s/ Tara D. Mackey, attorney-in-fact for Kevern R.									
Joyce				07/12/2017					
<u>**</u> Signature of Reportin		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).

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.