Edgar Filing: SNAP-ON Inc - Form 4

SNAP-ON Inc.

SNAP-ON I Form 4	nc										
May 01, 201	5										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL			
	UNITED 5		ashington			NGE C		OMB Number:	3235-0287		
	Check this box							Expires:	January 31,		
	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF					VERSHIP OF	Estimated average				
Section Form 4 c		SECURITIES						burden hours per response 0.5			
Form 5	Filed purs	uant to Section	16(a) of th	e Securi	ties E	xchange	e Act of 1934,	response	0.5		
obligatio may con) of the Public U	•	•	· ·			l			
See Instr		30(h) of the I	nvestment	Compar	ıy Ac	t of 194	0				
1(b).											
(Print or Type)	Responses)										
1 Name and /	ddrass of Penorting P	arson* o t	N	1 (7) 1	T 1'		5. Relationship of I	Paparting Pars	on(s) to		
FIEDLER JOHN F Symbol			r Name and Ticker or Trading				Issuer	Reporting Pers	011(3) 10		
			P-ON Inc [SNA]				(Check all applicable)				
(Last)	(First) (M	iddle) 3. Date of	of Earliest T	ransaction			(Check)		
			h/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify				
80TH STRI		0, 2801 04/30/2	2015				below)	below)	- (°F)		
			mendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Ionth/Day/Year)				Applicable Line)				
KENOSHA	WI 531/3						_X_ Form filed by O Form filed by Me				
							Person				
(City)	(State) (Z	Zip) Tab	ole I - Non-I	Derivative	Secur	ities Acqu	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactiv	4. Securi		*	5. Amount of Securities	6. Ownership	7. Nature of Indirect		
(Instr. 3)	• •	any	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Beneficially	Form: Direct Ber			
		(Month/Day/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)		
					(A)		Reported	(Instr. 4)	(mout t)		
					or		Transaction(s) (Instr. 3 and 4)				
Common				Amount	(D)	Price \$, , ,				
Stock	04/30/2015		A <u>(1)</u>	71	А	φ 149.55	10,413	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)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and A Underlying S (Instr. 3 and	Securities	8. Price of Derivativ Security (Instr. 5)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(2)</u>					(3)	(3)	Common Stock	9,607	

Reporting Owners

Reporting Owner Name / Address		Relationsh	nips					
	Director	10% Owner	Officer Other					
FIEDLER JOHN F SNAP-ON INCORPORATED 2801 80TH STREET KENOSHA, WI 53143	Х							
Signatures								
/s/ Ryan S. Lovitz under Power Fiedler	F.		05/01/2015					
<u>**</u> Signature of Repo			Date					
Evaluation of Doononooo								

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) Payment of fees in stock under the Company's Directors' 1993 Fee Plan.
- (2) 1 for 1.
- (3) All restrictions lapse and the reporting person will receive the underlying shares upon the earliest of retirement from the Board, death or a change in control.

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.