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| COMMERC Form 4 October 26, | CIAL METALS | S CO | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------|--|
| | | | | | | | | | OMB A | PPROVAL | |
| FORM | A 4 UNITE | RITIES AND EXCHANGE COMMISSIC shington, D.C. 20549 | | | | | | 3235-0287 | | | |
| Check th if no lon subject t Section Form 4 o Form 5 obligatio may con <i>See</i> Instr 1(b). | ger o 16. or Filed pons ttinue. | F CHAN Section 10 Public Ut of the In | GES IN SECUR 6(a) of th ility Hole | BENEF RITIES le Securit ding Con | Expires: January 31 Estimated average 2005 burden hours per response n 0.5 | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| HICKEY ADAM R Symbol COMM | | | Symbol | Issuer ERCIAL METALS CO | | | | | f Reporting Person(s) to ck all applicable) | | |
| | | | | of Earliest Transaction Day/Year) 2016 | | | | Director 10% Owner X Officer (give title Other (specify below) below) below) VICE PRESIDENT & CONTROLL | | | |
| | (Street) | | | ndment, Da th/Day/Year | - | 1 | | 6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by M | One Reporting P | erson | |
| IRVING, T | X /5039 | | | | | | | Person | | | |
| (City) | (State) | (Zip) | Table | e I - Non-I | Derivative | Securi | ities Acc | quired, Disposed of | f, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | | action Date 2A. Deemed Day/Year) Execution Date, if any (Month/Day/Year) | | Code (Instr. 8) | 4. Securities Acquired ction(A) or Disposed of (D) 8) (Instr. 3, 4 and 5) (A) or V Amount (D) Price | | | 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 | |
| Common Stock | 10/22/2016 | | | F | 879 | D | \$ 16.4 | 27,006 | D | | |
| Common Stock | 10/24/2016 | | | А | 6,661 | А | \$ 0 (1) | 33,667 | D | | |
| Common Stock | 10/24/2016 | | | F | 2,488 | D | \$ 16.4 | 31,179 | D | | |
| Common Stock | 10/24/2016 | | | А | 8,317 | А | \$ 0 (2) | 39,496 | D | | |
| Common Stock | 10/13/2016 | | | G <u>(3)</u> V | 20 | А | \$0 | 200 | I | Custodial Minor | |

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| Common | 10/13/2016 | $G^{(3)}_{(3)}$ V 20 | D ¢ | 0 16 027 | т | by Trust |
|--------|------------|-------------------------------------|------|----------|---|----------|
| Stock | 10/13/2010 | $\mathbf{G}_{\underline{(0)}}$ V 20 | D \$ | 0 10,957 | 1 | by Trust |

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 | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transactio | 5. | 6. Date Exerce Expiration D | | 7. Title Amoun | | 8. Price of Derivative | 9. Nu Deriv |
|---------------------------|------------------|--------------------------------------|------------------|------------------|------------|--------------------------------|----------------|-------------------|----------|------------------------|----------------|
| Security | or Exercise | (intentil Duy/Teur) | any | Code | of | (Month/Day/ | | Underly | | Security | Secu |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Securiti | ies | (Instr. 5) | Bene |
| | Derivative | | | | Securities | | | (Instr. 3 | 3 and 4) | | Owne |
| | Security | | | | Acquired | | | | | | Follo |
| | • | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | A | Amount | | |
| | | | | | | D (| г · ./· | | or | | |
| | | | | | | | Expiration | Title N | Number | | |
| | | | | | | Exercisable | Date | С | of | | |
| | | | | Code V | (A) (D) | | | S | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---------------------------------------------------------------------------|---------------|-----------|---------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| HICKEY ADAM R 6565 N. MACARTHUR BLVD. SUITE 800 IRVING, TX 75039 | | | VICE PRESIDENT & CONTROLL | | | | |
| Signatures | | | | | | | |
| By: Danna K. Cary For: Adam R. Hickey | | 10/26/2 | 016 | | | | |

**Signature of Reporting Person

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).
- (1) Represents the settlement of previously reported performance shares granted on October 22, 2013. The performance shares vested above target.
- (2) On October 24, 2016, the reporting person was granted an award of restricted stock units, vesting in three equal annual installments beginning on the first anniversary of the grant date.

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(3) Represents the transfer of 10 shares each to individual accounts for his son and daughter, in which Mr. Hickey is custodian, under the Uniform Transfer to Minors Act. There are now 110 shares in his son's account and 90 shares in his daughter's account.

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.