Edgar Filing: STEEL DYNAMICS INC - Form 4

STEEL DYNA	AMICS INC										
Form 4											
July 18, 2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL		
	UNITED S	TATES SECUR Was	ITIES AI hington,]			NGE (COMMISSION	OMB Number:	3235-0287		
Check this if no longer subject to Section 16. Form 4 or Form 5 obligations may contin <i>See</i> Instruc 1(b).	r STATEM	ENT OF CHAN uant to Section 10) of the Public Ut 30(h) of the In	SECURI 6(a) of the ility Hold	TIES Securiti ing Com	es Ex pany	chang Act o	ge Act of 1934, f 1935 or Sectio	Expires: Estimated a burden hou response	irs per		
(Print or Type Re	esponses)										
1. Name and Add MARCUCCI	Name and			-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last)(First)(Middle)3. Date of (Month/D)127 WEST BERRY STREET07/14/20			-	nsaction			X_Director10% Owner Officer (give titleOther (specify below)below)				
	(Street)		ndment, Dat th/Day/Year)	e Original			6. Individual or Jo Applicable Line) _X_ Form filed by 0	-	-		
FORT WAY	NE, IN 46802							More than One Re			
(City)	(State) (Z	Zip) Table	e I - Non-De	erivative S	ecuri	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned		
	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	Disposed (Instr. 3,	(A) o of (D 4 and (A) or) 5)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	07/14/2016		Code V A	Amount $207 (1)$ (2)	(D) A	Price \$ 0	63,256 <u>(3)</u>	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transac Code (Instr. 8	ction 0 3) E S A (, C 0 ()	onNumber Expir		Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code '	V (.	(A) (I	D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addre	55	Relationsh		
	Director	10% Owner	Officer	Other
MARCUCCILLI JAMES C 127 WEST BERRY STREE FORT WAYNE, IN 46802	гх			
Signatures				
James C. Marcuccilli 0	7/18/2016			
<u>**</u> 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).

Represents the number of additional shares of common stock underlying deferred stock units (DSUs) issued to the reporting person as a dividend equivalent on existing DSUs, in connection with this person's retainer as a director under the Steel Dynamics, Inc. 2015 Equity
(1) Incentive Plan (the "Plan"). This transaction is exempt from both the reporting requirements of Section 16(a), including Rule 16a-11, and

the provisions of Section 16(b), by virtue of this dividend reinvestment feature of the Plan and the Company's existing Dividend Reinvestment Plan, as well as being exempt from Section 16(b) independently by virtue of Rule 16b-3(d)(1) and (3).

Reportable as directly owned shares of common stock, rather than as a derivative security in Table II, because any and all underlying(2) DSUs are payable, at such time as they are to be settled, solely in shares of common stock. (See Lincoln National Corp. (March 20, 1992) (Q.3).

(3) Includes shares resulting from reinvestment of dividends on any underlying DSUs included in this total.

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.