Edgar Filing: Pendley Timothy E - Form 4

Form 4	·										
March 06, 200	Л								OMB AF	PROVAL	
		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287 January 31,			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). STATEMENT OF CHANGES IN BENEFICIA STATEMENT OF CHANGES IN BENEFICIA SECURITIES Filed pursuant to Section 16(a) of the Securities E Section 17(a) of the Public Utility Holding Company 30(h) of the Investment Company Action 1(b).						es Exc	OWNERSHIP OF hange Act of 1934, Act of 1935 or Section				
(Print or Type Res	sponses)										
Pendley Timothy E S			Symbol	2. Issuer Name and Ticker or Trading Symbol AZZ INC [AZZ]				5. Relationship of Reporting Person(s) to Issuer			
(Last) ONE MUSEU 500, 3100 WE			3. Date of E (Month/Day 03/06/200	/Year)	isaction			Director X Officer (give below)		Owner r (specify	
	(Street)		4. If Amend Filed(Month/		Original			6. Individual or Jo Applicable Line) _X_ Form filed by C			
FORT WORT	TH, TX 76107	7						Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Table I	- Non-De	rivative Se	ecuriti	es Acqu	iired, Disposed of	, or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Execu any	eemed tion Date, if h/Day/Year)	Code (Instr. 8)	on(A) or D (D)	4 and (A) or	d of 5) 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
COMMON STOCK ⁽⁵⁾	03/06/2009			Р	389	А	\$ 15.4	389	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)	Month/Day/Year) Execution Date, if TransactionDerivative E		Expiration D (Month/Day	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Securi (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	A oi N of
STOCK APPRECIATION RIGHTS	<u>(1)</u>	03/06/2009		А	11,955	(2)	(2)	COMMON STOCK	1
RESTRICTED STOCK UNITS	<u>(3)</u>	03/06/2009		А	2,608	(4)	(4)	COMMON STOCK	

Reporting Owners

Reporting Owner Name / Address		Relationships						
			10% Owner	Officer	Other			
Pendley Timothy E ONE MUSEUM PLACE SU 3100 WEST 7TH STREET FORT WORTH, TX 76107				VP GALVANIZING				
Signatures								
DANA PERRY	03/06/200	9						

<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).
- (1) THE BASE PRICE OF SUCH SAR SHALL BE DETERMINED BY THE CLOSING PRICE OF ONE SHARE OF COMMON STOCK ON THE NEW YORK STOCK EXCHANGE FOR THE GRANT DATE OF SUCH AWARDS.
- (2) ON EACH OF THE FIRST THREE ANNIVERSARIES OF THE EFFECTIVE DATE, ONE-THIRD (1/3) OF THE STOCK APPRECIATION RIGHTS GRANTED HEREBY SHALL VEST.
- (3) THE BASE PRICE OF SUCH RSU SHALL BE DETERMINED BY THE CLOSING PRICE OF ONE SHARE OF COMMON STOCK ON THE NEW YORK STOCK EXCHANGE FOR THE GRANT DATE OF SUCH AWARDS.
- (4) THE RSU SHALL VEST AND BE EXERCISABLE IN FULL ON THE THIRD ANNIVERSARY OF THE GRANT DATE.
- (5) SHARES ACQUIRED UNDER AZZ'S STOCK PURCHASE PLAN.

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.