ARVINMERITOR INC

Form 4 June 10, 2008

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

Number:

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subject to Section 16. Form 4 or Form 5 obligations may continue.

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if no longer

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

1(b).

Common

Stock

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * CUMMINS LINDA M			2. Issuer Name and Ticker or Trading Symbol ARVINMERITOR INC [ARM]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)		3. Date of Earliest Transaction					(Check all applicable)			
ARVINM WEST MA	(1	(Month/Day/Year) 06/10/2008					Director10% OwnerOther (specify below) Senior VP, Communications				
		4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
TROY, M							Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-l	Derivativ	e Secı	urities Ac	quired, Dispose	d of, or Benef	icially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da any (Month/Day/	ate, if () (Year) (3. Transactio Code (Instr. 8)	4. Securi n(A) or Di (Instr. 3,	spose	d of (D)	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								3,993	I	ArvinMeritor Savings Plan	
Common Stock	06/10/2008			J(2)	145	A	\$ 16.09	23,517	I	Restricted Stock (3)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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12,303

D

SEC 1474 (9-02)

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displays a currently valid OMB control

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. TransactionNumber Code of (Instr. 8) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		•	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Derivar Securit (Instr. :
				Code V	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock Share Equivalents	\$ 0					<u>(5)</u>	(5)	Common Stock	3,977	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CUMMINS LINDA M ARVINMERITOR, INC. 2135 WEST MAPLE ROAD TROY, MI 48084-7186

Senior VP, Communications

Signatures

Linda M. Cummins, By Barbara Novak, Attorney-in-fact

06/10/2008

**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) Shares purchased periodically and held in ArvinMeritor common stock funds in an employee benefit trust established under the ArvinMeritor, Inc. Savings Plan, based on information furnished by the Plan Administrator as of May 31, 2008.
- (2) Acquisition of additional shares of restricted stock through automatic reinvestment of quarterly dividend, based on information provided by restricted stock plan administrator.
- (3) Held by the issuer to implement restrictions on transfer unless and until certain conditions are met.

(4)

Reporting Owners 2

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Share equivalents related to ArvinMeritor common stock, held under ArvinMeritor's supplemental savings plan, based on information furnished by the Plan Administrator as of May 31 2008.

(5) Inapplicable

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.