Edgar Filing: SNAP-ON Inc - Form 4

| SNAP-ON In | с | | | | | | | | | | | | |
|--|---|-------------------|--|---|--|--|----------------|------------|--|------------------|------------------|--|--|
| Form 4 | | | | | | | | | | | | | |
| February 16, | 2016 | | | | | | | | | | | | |
| FORM 4 LINUTED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | | OMB APPROVAL | | | | |
| CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | | | |
| Check this | | | | | | | | | | Expires: | January 31 | | |
| if no longer subject to STATEMENT OF CHANG | | | | | ES IN BENEFICIAL OWNERSHIP | | | | | Estimated a | 2009 Laverage | | |
| Section 16 | | SECURITIES | | | | | | | burden hours per | | | | |
| Form 4 or | | | | | | | | | response 0. | | | | |
| Form 5 obligation | · · | | | | | | | - | ge Act of 1934, | | | | |
| may contin See Instruct 1(b). | nue. Section 17(2 | 30(h) of the Pub. | | • | | • | - · | | f 1935 or Sectio 40 | 'n | | | |
| (Print or Type R | esponses) | | | | | | | | | | | | |
| STEBBINS DONALD J Symbol | | | | r Name and Ticker or Trading ON Inc [SNA] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| | | | | of Earliest Transaction | | | | | (Check all applicable) | | | | |
| () () () () () () () () () () | | | | th/Day/Year) | | | | | X Director 10% Owner | | | | |
| | | | 2/11/2016 | | | | | | Officer (give title Other (specify below) | | | | |
| | | | | nendment, Date Original Ionth/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check | | | | |
| | | | | | | | | | Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| KENOSHA, | WI 53143 | | | | | | | | | More than One Re | | | |
| (City) | (State) | (Zip) | Table | I - Non- | Der | vivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficia | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | n Date, if TransactionAcquired (A) or Code Disposed of (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | | | | | |
| Common | | | | | | | | Price | 1 505 | D | | | |
| Stock | 02/11/2016 | | | А | | 825 | А | <u>(1)</u> | 1,785 | 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) | 4. Transacti Code (Instr. 8) | of | er Expiration E (Month/Day tive ies ed ed 3, | | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---------------------------------------|--------|--|--------------------|-----------------|---|--|
| | | | Code V | (A) (I | D) Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Deferred Stock Units | <u>(2)</u> | | | | (3) | (3) | Common Stock | 742.748 | |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | | |
|--|------------|------------|---------|-------|--|
| | Director | 10% Owner | Officer | Other | |
| STEBBINS DONALD J 2801 80TH STREET KENOSHA, WI 53143 | Х | | | | |
| Signatures | | | | | |
| /s/ Ryan S. Lovitz under Power Stebbins | 02/15/2016 | | | | |
| <u>**</u> Signature of R | 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) Grant of restricted stock from the Company.
- (2) 1 for 1.
- (3) Scheduled for issuance in a lump sum after the earliest of termination of service as a director, death or upon a change of 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.