Edgar Filing: Premdas Perry W - Form 4

Premdas Po Form 4	erry W											
January 13	2010											
									OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549							MMISSION	OMB Number:	3235-0287			
	this box			0	,				Expires:	January 31,		
if no longer subject to Section 16. Form 4 or			F CHA		N BENEFI(JRITIES	CIAL	. OWNI	ERSHIP OF	Estimated a burden hour response	•		
Form 5 obligat may co <i>See</i> Ins 1(b).	ions Section 17	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										
(Print or Type	e Responses)											
1. Name and Address of Reporting Person <u>*</u> Premdas Perry W			21 isouer i faine and i fener of frauing				,	5. Relationship of Reporting Person(s) to Issuer				
			FERR	O CORP	[FOE]			(Check	all applicable)		
(Last)	(First)	(Middle)			Transaction					2		
	RO CORPORATIO DE AVENUE	ON, 1000	(Month 01/11/	/Day/Year) /2010)		_	_X Director Officer (give t elow)		Owner r (specify		
(Street)			4. If Amendment, Date Original 6				6	6. Individual or Joint/Group Filing(Check				
						Applicable Line) _X_ Form filed by One Reporting Person						
CLEVEL	AND, OH 44114						_	X_ Form filed by O Form filed by Me erson				
(City)	(State)	(Zip)	Та	ble I - Nor	n-Derivative So	ecuriti	ies Acqui	red, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution l any	ecution Date, if		Code (Instr. 3, 4 and 5)			Securities Beneficially Owned Following	OwnershipIndiaForm:OwnDirect (D)(Instor Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock	01/11/2010			А	3,127.777 (1)	А	\$ 8.5524	37,759.106	Ι	Dir Def Compensation		
Common Stock								1,000	D			

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

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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) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secu (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Stock Units	(2)					02/25/2010	02/25/2010	Common Stock	3,800	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Premdas Perry W C/O FERRO CORPORATION 1000 LAKESIDE AVENUE CLEVELAND, OH 44114	Х						
Signatures							
/s/ John T. Bingle, Treasurer, by Attorney	f	01/13/2010					
**Signature of Reporting Per	son		Г	Date			

Signature of Reporting Person

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).
- Director Fees are deferred quarterly to the Ferro Corporation Deferred Compensation Plan for Non-Employee Directors, which in turn, (1) makes contributions to the Ferro Dividend Reinvestment Plan for the purchase of Ferro Common Stock. Deferral elections are irrevocable and distributions occur only upon death or cessation of the directorship.

Award granted to Non-Employee Directors. At the end of the deferral period of one year, the units are redeemable for an equal number of (2) shares of Ferro Common Stock. The units do not have the right to vote or receive dividends and are subject to forfeiture if the recipient is no longer serving as a Director at the end of the deferral period except in the case of retirement, disability or death.

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.