Edgar Filing: STRICKLEN JIM - Form 4

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Form 4													
January 28, 20 FORM	TIES AND EXCHANGE COMMISSION						OMB AF OMB Number:	PROVAL 3235-0287					
Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contir <i>See</i> Instruct 1(b).	r STATI Filed p sue. Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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								Expires: January 20 Estimated average burden hours per response			
(Print or Type Re	esponses)												
1. Name and Address of Reporting Person * 2. Issuer N STRICKLEN JIM Symbol AZZ INC				Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) ONE MUSEI 500, 3100 W			3. Date of I (Month/Da 01/25/20	y/Year)	`ran	saction		- - t	Director _X Officer (give t below) VP MANUFAC	title $\underline{\qquad}$ 10% Other below)	Owner r (specify		
	(Street)		4. If Amen Filed(Montl			Original		1	5. Individual or Joi Applicable Line) X_ Form filed by O	*			
FORT WOR	ГН, TX 7610	7						-	Form filed by Mo Person				
(City)	(State)	(Zip)	Table	I - Non-l	Der	ivative Se	ecuriti	es Acqui	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Execut any	eemed ion Date, if n/Day/Year)	Code (Instr. 8	3)	4. Securit r(A) or Dis (Instr. 3, 4	sposed 4 and 5 (A) or	1 of (D) 5)	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	01/25/2013			Code S	V	Amount 10,526	(D) D	Price \$ 43.17	12,054	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)

Reporting Owners

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
STRICKLEN JIM ONE MUSEUM PLACE S 3100 WEST 7TH STREET FORT WORTH, TX 76107				VP MANUFACTURING STRATEGIES					
Signatures									
DANA PERRY	01/28/2013								
<u>**</u> Signature of Reporting Person	Date								
Evelopetion of									

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).

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.