#### MODINE MANUFACTURING CO

Form 4 June 09, 2014

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

5 D 1 (\* 1 \* CD - (\* D - ( ) (

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

subject to Section 16. Form 4 or Form 5 obligations

Check this box

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

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Common

stock

06/05/2014

(Print or Type Responses)

1 Name and Address of Departing De

1. Name and Address of Reporting Person			2. Issuer Name and Ticker or Trading Symbol MODINE MANUFACTURING CO [MOD]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)	(First) (M	Middle)		of Earliest Transaction (Day/Year)					Director 10% OwnerX_ Officer (give title Other (specify below) below)			
1500 DEKOVEN AVE.			06/05/2014						below) Regional VP - North America			
(Street)			4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Y	ear)				Applicable Line) _X_ Form filed by 0	One Reporting Pe	rson	
RACINE, WI 53403								Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non	ı-De	erivative	Securi	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deer	med	3.		4. Securi	ties Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year) Execution		on Date, if Transaction(A) or Disposed of (D)			` ′	Securities	Form: Direct	Indirect			
(Instr. 3) any		Code (Instr. 3, 4 and 5)			5)	Beneficially (D) or Benefic						
		(Month/l	Day/Year)	(Instr. 8	3)				Owned	Indirect (I)	Ownership	
									Following Reported	(Instr. 4)	(Instr. 4)	
							(A)		Transaction(s)			
							or		(Instr. 3 and 4)			
				Code	V	Amount	(D)	Price	,			

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

F

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

39,511 (2)

D

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1,402

(1)

D

#### Edgar Filing: MODINE MANUFACTURING CO - Form 4

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4.	5. orNumber	6. Date Exerc Expiration Da		7. Title Amou		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Monun Day/ Year)	any Code (Month/Day/Year) (Instr. 8)		of Derivative	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			lying ties 3 and 4)	Security (Instr. 5)	Secur Bene Owne 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

Wollenberg Scott D 1500 DEKOVEN AVE. RACINE, WI 53403

Regional VP - North America

### **Signatures**

Margaret C. Kelsey, Attorney in Fact 06/06/2014

\*\*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 disposed of in a private transaction to cover tax withholding.
- (2) This total includes 915 units of Modine common stock held in the Reporting Person's Modine 401(k) Retirement Plan account.

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.

Reporting Owners 2