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Form 4	-										
January 05, 20											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION						N ON		APPROVAL			
Charle this	hov		Wa	shington,	D.C. 20	549			mber:	3235-028	
Section 16. Form 4 or Form 5 Filed pursuant to		suant to S	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934,						Estimated average burden hours per response		1,)5 .5
obligations may contine <i>See</i> Instruct 1(b).	ue.			•	•	pany Act y Act of 19	of 1935 or Sect 940	ion			
(Print or Type Res	sponses)										
1. Name and Address of Reporting Person <u>*</u> Hendrickson Gary E			2. Issuer Name and Ticker or Trading Symbol VALSPAR CORP [VAL]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N	/liddle)		f Earliest Tr			(Cł	neck all a	applicat	ole)	
P. O. BOX 14	61		(Month/E 01/03/2	Day/Year)			X Director X Officer (g below)		O below)		
MINNEAPOI	(Street) LIS, MN 55440			endment, Da nth/Day/Year	-	1	6. Individual or Applicable Line) _X_ Form filed b Form filed by Person	y One Re	eporting	Person	
(City)	(State)	(Zip)	Tabl	le I - Non-F)erivative	Securities A	cquired, Disposed	of. or F	Renefici	ally Owned	
	. Transaction Date Month/Day/Year)		ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit mAcquired Disposed (Instr. 3, -	ies (A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Own	ership Direct t (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
common stock							169,186	D			
common stock							14,620	Ι		Trust	
common stock							12,920	Ι		Trust	
common stock							11,111	Ι		Savings and Retirement Plan (1)	ł

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)

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. Transactic Code (Instr. 8)	5. Number onof 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. Prie Deriv Secur (Instr.
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
cash-settled restricted stock units	<u>(2)</u>	01/03/2012		А	537 (<u>3)</u>	(4)	(4)	common stock	537	\$

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Hendrickson Gary E P. O. BOX 1461 MINNEAPOLIS, MN 55440	Х		President and CEO					
Signatures								
/s/ Linda Colman, by Power of Attorney	01/05/2012							

<u>**</u>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).

Date

- (1) vested shares in Valspar Savings and Retirement Plan as of allocation date 10/28/11
- (2) 1-for-1
- (3) The cash-settled restricted stock units were issued pursuant to dividend equivalent rights for certain outstanding cash-settled restricted stock units held by the reporting person on January 3, 2012, the dividend record date.
- (4) The cash-settled restricted stock units will vest on 9/13/2016 and shall be paid in cash at retirement.
- (5) The number includes previously reported underlying cash-settled restricted stock units.

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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.