Edgar Filing: Friendly Ian R - Form 4

| Friendly Ian F | R | | | | | | | | | | |
|--|--|--|---|--|--------------------------|--|---------------|---|--|---|--|
| Form 4 March 07, 202 | 13 | | | | | | | | | | |
| | | | | | | | | | OMB AF | PROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | OMB Number: | 3235-0287 | | |
| Check this box if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESForm 4 or Form 5 obligations | | | | | | Expires:January 31Expires:2005Estimated averageburden hours perresponse0.5 | | | | | |
| (Print or Type Re | esponses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Friendly Ian R | | | 2. Issuer Name and Ticker or Trading Symbol VALSPAR CORP [VAL] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (I | Middle) | 3. Date o | of Earliest T | ransactior | 1 | | (Check | all applicable |) | |
| P.O. BOX 1461 | | | (Month/Day/Year) 03/06/2013 | | | | • | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| | | | | mendment, Date Original Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MINNEAPO | DLIS, MN 55440 |) | | | | | | Form filed by Mo Person | | | |
| (City) | (State) | (Zip) | Tab | le I - Non- | Derivativ | e Secu | irities Acqu | ired, Disposed of, | or Beneficial | ly Owned | |
| | 2. Transaction Date Month/Day/Year) | 2A. Deemed Execution I any (Month/Day | Date, if | 3. Transactio Code (Instr. 8) Code V | omr Dispos (Instr. 3, | (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) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| common stock | | | | Code V | mount | (D) | The | 14,378 | Ι | Trust (1) | |
| common stock |)3/06/2013 | | | J | 220 | А | \$ 62.8222 | 220 | 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | | ate | Secur | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr |
|---|---|---|---|--|--|---------------------|--------------------|-------|--|---|--|
| | | | | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| I B | Director | 10% Owner | Officer | Other | | | |
| Friendly Ian R P.O. BOX 1461 MINNEAPOLIS, MN 55440 | Х | | | | | | |
| Signatures | | | | | | | |
| /s/ Linda Colman, by Power of Attorney | 03/07/2013 | | | | | | |

**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).

These shares are held in a trust for the benefit of the reporting person's children and the reporting person's spouse is trustee of the trust.(1) The reporting person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

Remarks:

J stock distribution for director retainer

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.