Edgar Filing: CASTLE A M & CO - Form 4

CASTLE A M	I & CO												
Form 4													
April 25, 2014	ŀ												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287				
Check this box										Expires:	January 31,		
if no longer subject to STATEMENT OF CHANC				GES IN BENEFICIAL OWNERS					NERSHIP OF	Estimated a	2005 average		
Section 16.		SECURITIES							burden hours per				
Form 4 or Form 5	T '1 1	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5			
obligations	-								-				
may contin	ue. Section 17(a	30(h) of the Publ		•		•	• •		f 1935 or Sectio	n			
See Instruc 1(b).	tion	30(II) 01 u		estinei	n (Joinpan	y Aci	. 01 19	40				
1(0).													
(Print or Type Re	sponses)												
						•	f Reporting Person(s) to						
Lieberman Pa	amela Forbes	Sym	nbol						Issuer				
CASTLE				TLE A M & CO [CAS]					(Check all applicable)				
(Last)	(First) (M	liddle) 3. D	3. Date of Earliest Transaction				(Check an approable)						
			nth/Day/Year)					_X_ Director10% Owner					
1420 KENSINGTON 04/24/20			.014			Officer (give title Other (specify below) below)							
ROAD, SUIT	E 220												
(Street) 4. If Amer			endment, Date Original nth/Day/Year)					6. Individual or Joint/Group Filing(Check					
Filed(Mont								Applicable Line) _X_ Form filed by One Reporting Person					
OAK BROOM	K, IL 60523								Form filed by M Person	More than One Ro	eporting		
(City)	(State) (Zip)	Table	e I - Non	-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	2A. Deemed	ned 3. 4. Securities						5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	n Date, if TransactionAcquired (A) or							Form: Direct	Indirect			
(Instr. 3)		any (Month/Day/	CodeDisposed of (D)Day/Year)(Instr. 8)(Instr. 3, 4 and 5)						•	/ -	Beneficial Ownership		
(Month/Day/Year)				(11150.0) (11150.0, 4 and 3)				5)	Following		(Instr. 4)		
				(A)					Reported				
							or		Transaction(s) (Instr. 3 and 4)				
				Code	V	Amount	(D)	Price	(msu. 5 and 4)				
Common Stock	04/24/2014			А		4,854	А	\$0	31,350	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)

Edgar Filing: CASTLE A M & CO - Form 4

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, 4, and 5)	;	ate	7. Title Amoun Underl Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own 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			
Lieberman Pamela Forbes 1420 KENSINGTON ROAD SUITE 220 OAK BROOK, IL 60523	Х						
Signatures							
Marec E. Edgar, Attorney-in-Fact	0	4/25/2014					

**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).

Remarks:

Exhibit 24: Power of Attorney

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.