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MACDEDIALD INC

MACDERMI	ID INC										
Form 4	7										
April 13, 2007 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 if no long subject to Section 16 Form 4 or	er STATEM 5.	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31, 2005 d average ours per e 0.5	
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction Form 5 obligations May continue. See Instruction Form 5 See Instruction 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 30(h) of the Investment Company Act of 1940 Section 1940											
(Print or Type R	esponses)										
SIEGMUND MICHAEL Symbo				ssuer Name and Ticker or Trading bol CDERMID INC [MRD]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	liddle)	3. Date of Earliest Transaction				(Chec.	Check all applicable)			
1 JOFRAN LANE			(Month/Day/Year) 04/12/2007					Director10% Owner XOfficer (give titleOther (specify below) below) Divisional President			
				endment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
GREENWIC	CH, CT 06830							Person	lore than One Re	eporting	
(City)	(State) (State)	Zip)	Table	e I - Non-De	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	04/12/2007			D	2,269	D	\$ 35	0	D		
Common Stock	04/12/2007			D	600	D	\$ 35	0	I	Trust for Child	
Common Stock	04/12/2007			D	12,464	D	\$ 35	0	I	ERISA Plan	

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

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration E (Month/Day	Date	7. Title and A Underlying S (Instr. 3 and	Securities	8. Pr Deriv Secu (Insti
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	<u>(3)</u>	04/12/2007		D <u>(1)</u>	70,231	(3)	(3)	Common Stock	70,231	\$
Stock Options	<u>(3)</u>	04/12/2007		J <u>(2)</u>	57,000	<u>(3)</u>	(3)	Common Stock	57,000	\$

Reporting Owners

Reporting Owner Name / Address	Relationships						
I B	Director	10% Owner	Officer	Other			
SIEGMUND MICHAEL 1 JOFRAN LANE GREENWICH, CT 06830			Divisional President				

Signatures

Michael 04/12/2007 Siegmund 04/12/2007 <u>**</u>Signature of Date 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) Return of in the money options to Company @ 35.00 per option less effective exercise price (10,000 @ 30.33/sh; 40,000 @ 22.65/sh; 15,000 @ 22.65/sh; 30.47/sh)
- (2) Forfeiture of out of money options

(**3**) N/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.