

MUELLER INDUSTRIES INC  
 Form 3  
 May 12, 2014

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Steinriede Anthony		(Month/Day/Year)	MUELLER INDUSTRIES INC [MLI]	
(Last)	(First)	(Middle)	05/01/2014	
8285 TOURNAMENT DRIVE,Â SUITE 150			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
MEMPHIS,Â TNÂ 38125			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below)	(specify below)
			Director of Finance	
				6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,738 <sup>(1)</sup>	D	Â

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Employee Stock Option (Right to Buy)	Â (2)	07/27/2017	Common Stock	3,000	\$ 18.46	D	Â
Employee Stock Option (Right to Buy)	Â (3)	07/25/2018	Common Stock	3,000	\$ 13.25	D	Â
Employee Stock Option (Right to Buy)	Â (4)	07/30/2019	Common Stock	2,000	\$ 11.92	D	Â
Employee Stock Option (Right to Buy)	Â (5)	07/23/2020	Common Stock	3,000	\$ 12.24	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Steinriede Anthony 8285 TOURNAMENT DRIVE SUITE 150 MEMPHIS, TN 38125	Â	Â	Â Director of Finance	Â

## Signatures

Anthony Steinriede 05/12/2014

\*\*Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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) These shares will vest as follows: 500 on 7/30/2014; 850 on 7/30/2015; 1,319 on 7/30/2016; 684 on 7/30/2017; 385 on 7/30/2018
- (2) These options will vest as follows: 600 on 7/27/2008; 600 on 7/27/2009; 600 on 7/27/2010; 600 on 7/27/2011; 600 on 7/27/2012
- (3) These options will vest as follows: 600 on 7/25/2009; 600 on 7/25/2010; 600 on 7/25/2011; 600 on 7/25/2012; 600 on 7/25/2013
- (4) These options will vest as follows: 400 on 7/30/2010; 400 on 7/30/2011; 400 on 7/30/2012; 400 on 7/30/2013; 400 on 7/30/2014
- (5) These options will vest as follows: 600 on 7/23/2011; 600 on 7/23/2012; 600 on 7/23/2013; 600 on 7/23/2014; 600 on 7/23/2015

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.