Edgar Filing: MODINE MANUFACTURING CO - Form 4

| MODINE M. Form 4 June 12, 2014 | ANUFACTURI 4 | NG CO | | | | | | | | | |
|--------------------------------------------------------------|---------------------------------------|-------------------|------------------------------------------------------------|--------------------------------------------------|----------------|------------|-------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------|--|
| FORM | 4 | | | | | | | | OMB AF | PROVAL | |
| Washington, D.C. 20549 | | | | | | COMMISSION | OMB Number: | 3235-0287 | | | |
| Check thi if no long | or. | | | and Di | | | 1.0117 | | Expires: | January 31, 2005 | |
| subject to STATEMENT OF CHANGES IN BE Section 16. SECURIT | | | | | | ICIA | LOW | Estimated average burden hours per | | | |
| Form 4 or Form 5 | | | Castion 1 | (a) of the | - Ci4 | : T | | • | | | |
| obligatior may conti <i>See</i> Instru 1(b). | ^{is} Section 17 | (a) of the | | ility Hold | ling Con | ipany | y Act of | e Act of 1934, E 1935 or Section 40 | 1 | | |
| (Print or Type R | lesponses) | | | | | | | | | | |
| Bowser Scott L Symbol | | | r Name and Ticker or Trading NE MANUFACTURING CO | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (Last) 1500 DEKO | | (Middle) | 3. Date of (Month/D 06/11/20 | - | ansaction | | | Director X_ Officer (give below) | | Owner er (specify | |
| | (Street) | | 4 If Amo | ndmant Da | to Origina | 1 | | - | | a Chaola | |
| · · · · · · · · · · · · · · · · · · · | | | | 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 Person | | | |
| (City) | (State) | (Zip) | | | | a | •.• | | D (11) | | |
| | ` | | | | | | _ | uired, Disposed of | | - | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year |) Executio any | | 3. Transactic Code (Instr. 8) Code V | (Instr. 3, | spose | d of (D) 5) Price | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common stock | 06/11/2014 | | | F | 503 <u>(1)</u> | D | \$ 15.11 | 81,642 <u>(2)</u> | 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)

| 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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-----------------------|---------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---------------------------------------------------------|---------------|-----------|--------------------|-------|--|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | | |
| Bowser Scott L 1500 DEKOVEN AVE. RACINE, WI 53403 | | | Regional VP - Asia | | | | | |
| Signatures | | | | | | | | |
| Margaret C. Kelsey, Attorney in Fact | 06/12/2014 | | | | | | | |
| **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).
- (1) Shares disposed of in a private transaction to cover tax withholding.
- (2) This total includes 3,909 units of Modine common stock held in the Reporting Person's Modine 401(k) Retirement Plan account.

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.