Edgar Filing: CRONIN JAMES P - Form 4

CRONIN JA Form 4													
December 1 FORN Check th if no lon subject to Section Form 4 Form 5 obligation may corr See Insta 1(b).	A 4 UNITED his box ager to 16. or 57 Filed pu Section 17	Wa F CHAN Section 1	shing NGES SEC 16(a) o Itility 1	ton IN CUF of th Hol	, D.C. 20 BENEF RITIES ne Securi ding Con	OMMISSION ERSHIP OF Act of 1934, 1935 or Section	Number: 3235-028 Number: January 31 Expires: 2009 Estimated average burden hours per response 0.5						
(Print or Type													
1. Name and Address of Reporting Person <u>*</u> CRONIN JAMES P			2. Issuer Name and Ticker or Trading Symbol CYTEC INDUSTRIES INC/DE/ [CYT]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 5 GARRET	3. Date of Earliest Transaction (Month/Day/Year) 12/12/2005						Director I 0% Owner X_Officer (give title I Other (specify below) Executive VP and CFO						
Filed(Mo									6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(State)	(Zip)					~		Person				
	. ,	-			on-l			-	ired, Disposed of,		-		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executior any		Code (Instr.	8)	4. Securi nor Dispos (Instr. 3, Amount	sed of		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	12/12/2005			М		2,500	А	\$ 25.0833	83,506	D			
Common Stock	12/12/2005			S		2,500	D	\$ 45.68	81,006	D			
Common Stock	12/13/2005			М		2,500	A	\$ 25.0833	83,506	D			
Common Stock	12/13/2005			S		2,500	D	\$ 45.99	81,006	D			
Common Stock	12/13/2005			М		2,500	А	\$ 25.0833	83,506	D			

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Common Stock	12/13/2005	S	2,500	D	\$ 46.25	81,006	D	
Common Stock	12/14/2005	М	3,250	А	\$ 25.0833	84,256	D	
Common Stock	12/14/2005	S	3,250	D	\$ 46.5	81,006	D	
Common Stock (1)						25,685	I <u>(2)</u>	savings plan <u>(1)</u>

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. Transactio Code (Instr. 8)	5. Number securities b) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. D S (I
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option Right to buy	\$ 25.0833	12/12/2005		М		2,500	02/15/1997	02/14/2006	Common Stock	2,500	
Option Right to buy	\$ 25.0833	12/13/2005		М		2,500	02/15/1997	02/14/2006	Common Stock	2,500	2
Option Right to buy	\$ 25.0833	12/13/2005		М		2,500	02/15/1997	02/14/2006	Common Stock	2,500	2
Option Right to buy	\$ 25.0833	12/14/2005		М		3,250	02/15/1997	02/14/2006	Common Stock	3,250	14

Reporting Owners

Reporting Owner Name / Address

Relationships

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Executive VP and CFO

Director 10% Owner Officer

Other

CRONIN JAMES P 5 GARRET MOUNTAIN PLAZA WEST PATERSON, NJ 07424

Signatures

James P. Cronin

<u>**</u>Signature of Reporting Person

12/14/2005 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) Includes 2900 shares Beneficial ownership disclaimed; owned by wife.
- (2) Excludes shares held in Employees' Savings Plan or Supplemental Plan which are eligible for deferred reporting on Form 5, as per note to instruction 4(a)(i).

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.