## Edgar Filing: ARGAN INC - Form 4

| ARGAN INC  |                                     |  |   |  |                          |   |            |  |  |   |  |
|--|-------------------------------------|--|---|--|--------------------------|---|------------|--|--|---|--|
| Form 4<br>April 17, 2014   |                                     |  |   |  |                          |   |            |  |  |   |  |
| · · · · · ·  | •                                   |  |   |  |                          |   |            |  | OMB A  | PPROVAL   |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549   |                                     |  |   |  |                          |   |            | 3235-0287  |  |   |  |
| Check this be<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or  |                                     | CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES |   |  |                          |   | burden hou | Expires: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5                              |  |   |  |
| Form 5<br>obligations<br>may continue<br><i>See</i> Instructio<br>1(b).  | Section 17(a)                       |  | lic Uti   | lity Hold  | ing Com                  | pany                                      | Act o      | ge Act of 1934,<br>f 1935 or Sectio<br>40  | 'n   |   |  |
| (Print or Type Resp  | onses)                              |  |   |  |                          |   |            |  |  |   |  |
| 1. Name and Address of Reporting Person <sup>*</sup><br>TRUDEL ARTHUR F<br>(Last) (First) (Middle)<br>8704 HARNESS TRAIL |                                     |  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol             |  |                          |   | g          | 5. Relationship of Reporting Person(s) to Issuer   |  |   |  |
|  |                                     |  | ARGAN INC [AGX]   |  |                          |   |            | (Check all applicable)   |  |   |  |
|  |                                     |  | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>04/16/2014 |  |                          |   |            | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>Senior Vice President and CFO       |  |   |  |
| (Street) 4   |                                     |  | 4. If Amendment, Date Original                                    |  |                          | 6. Individual or Joint/Group Filing(Check |            |  |  |   |  |
| POTOMAC, M   | D 20854                             | File   | ed(Mont   | h/Day/Year)                                      |                          |   |            | Applicable Line)<br>_X_ Form filed by<br>Form filed by M<br>Person   | One Reporting Pe<br>More than One Re                                 |   |  |
| (City)   | (State) (Z                          | Zip)   | Table   | I - Non-De                                       | erivative S              | ecurit                                    | ties Aco   | quired, Disposed o   | f, or Beneficial   | lly Owned   |  |
|  | Transaction Date<br>Aonth/Day/Year) |  |   | 3.<br>Transactic<br>Code<br>(Instr. 8)<br>Code V | Disposed<br>(Instr. 3, 4 | (A) or<br>of (D)<br>4 and 2<br>(A)<br>or  | )          | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Common<br>Stock  |                                     |  |   |  |                          |   |            | 10,000   | 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)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5. Number of<br>orDerivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                     |
|---|---|---|---|--|--|--|--------------------|---|-------------------------------------|
|   |   |   |   | Code V                                 | (A) (D)  | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of Shares |
| Stock<br>Option to<br>purchase<br>Common<br>Stock   | \$ 27.09  | 04/16/2014                              |   | A                                      | 35,000   | 04/16/2015   | 04/16/2024         | Common<br>Stock   | 35,000                              |

## **Reporting Owners**

| Reporting Owner Name / Address                             | Relationships |           |                               |       |  |  |
|--|---------------|-----------|-------------------------------|-------|--|--|
|  | Director      | 10% Owner | Officer                       | Other |  |  |
| TRUDEL ARTHUR F<br>8704 HARNESS TRAIL<br>POTOMAC, MD 20854 |               |           | Senior Vice President and CFO |       |  |  |
| Signatures   |               |           |                               |       |  |  |
| /s/ Arthur F.  | 4/17/2014     |           |                               |       |  |  |

Trudel 04/17/2014 \*\*Signature of Date Reporting Person

## **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).

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.