TIMKEN CO Form 4 February 07, 2012

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

0.5

Estimated average burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. 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

1(b).

Common Stock

Stock

(Restricted) Common

02/04/2012

(Print or Type Responses)

1. Name and Address of Reporting Person * MIRAGLIA SALVATORE J JR			2. Issuel I talle and Tienel of Trading					5. Relationship of Reporting Person(s) to Issuer				
			TIMKEN CO [TKR]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of E	Earliest Trai	isaction							
			(Month/Day	y/Year)				Director		Owner		
1835 DUEBER AVE. S. W.		02/04/2012					X Officer (give title Other (specify below)					
								Pres	sident - Steel			
	(Street)		4. If Amend	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
		Filed(Month	Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
CANTON, O	OH 44706							Form filed by MePerson	ore than One Re	porting		
(City)	(State)	(Zip)	Table 1	I - Non-De	rivative Se	ecuriti	es Acqu	quired, Disposed of, or Beneficially Owned				
1.Title of	2. Transaction I	Date 2A. D	eemed	3.	4. Securi	ties Ac	quired	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Ye	ear) Execu	ition Date, if	Transaction	on(A) or Di	isposed	of (D)	Securities	Ownership	Indirect		
(Instr. 3)		any		Code	(Instr. 3,	4 and 3	5)	Beneficially	Form:	Beneficial		
		(Mon	th/Day/Year)	(Instr. 8)				Owned	Direct (D)	Ownership		
								Following	or Indirect	(Instr. 4)		
						(A)		Reported	(I)			
						or		Transaction(s)	(Instr. 4)			
				Code V	Amount		Price	(Instr. 3 and 4)				

F

D

51.55

504

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

56,233

37,003

D

Ι

401(k)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	ber Expiration Date		Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security	ecurity Acquired								Follo	
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	tle Number		
						LACICISABLE			of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

MIRAGLIA SALVATORE J JR 1835 DUEBER AVE. S. W. CANTON, OH 44706

President - Steel

Signatures

Scott A. Scherff - Attorney in Fact

02/07/2012

**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).

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.

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