Edgar Filing: TRIUMPH GROUP INC - Form 4

TRIJIMPH GROUP INC

Form 4												
November 15									OMB A	PPROVAL		
FORM	UNITEDS	STATES		ITIES Al hington,			NGE	COMMISSION		3235-0287		
Check this if no longe subject to Section 16 Form 4 or	er STATEM	STATEMENT OF CHANGI				CIA	NERSHIP OF	Expires: January 31, 2005 Estimated average burden hours per response 0.5				
Form 5 obligations may continue. See Instruction 1(b). 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 Ro	esponses)											
1. Name and Address of Reporting Person * 2. Issue MANSFIELD WILLIAM L Symbol				Name and	Ticker or 7	Fradin	g	5. Relationship of Reporting Person(s) to Issuer				
•			TRIUM	PH GROU	UP INC	[TGI]		(Check all applicable)				
(Month			(Month/Da	Date of Earliest Transaction (onth/Day/Year) /10/2016				X_ Director10% Owner Officer (give titleOther (specify below)below)				
			nendment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 					
BERWYN, F	PA 19312							Form filed by M Person				
(City)	(State) (Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, it any (Month/Day/Year)		on Date, if	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Stock	11/10/2016			Code V A	Amount 5,035 (1)	(A) or (D) A	Price \$ 0	Transaction(s) (Instr. 3 and 4) 5,035	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)

Edgar Filing: T	RIUMPH GROUP	INC - Form 4
-----------------	--------------	--------------

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. Transac Code (Instr. 8)	 5. actionNumber of 8) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) 		(Month/Day/Year) erivative curities equired) or sposed (D) istr. 3,		Unde Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	√ (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
I. S.	Director	10% Owner	Officer	Other					
MANSFIELD WILLIAM L 899 CASSATT ROAD SUITE 210 BERWYN, PA 19312	Х								
Signatures									
John B. Wright, II, POA for W Mansfield		11/15	/2016						

**Signature of 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).

The reporting person received 5,035 restricted stock units, each unit representing the contingent right to receive one share of common stock. Forfeiture restrictions lapse on the restricted stock units on the first anniversary of the date of grant, unless earlier terminated as set

Date

(1) forth in the Company's 2016 Directors' Equity Compensation Plan (the "Plan"). The award is contingent upon approval of the Plan by stockholders within the next twelve months and will be void if such approval is not obtained. The Company intends to present a proposal to approve the Plan at the 2017 Annual Meeting of Stockholders.

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.