## Edgar Filing: SHERWIN WILLIAMS CO - Form 4

SHERWIN Form 4 May 09, 201	WILLIAMS CO 4										
<b>FORM</b> Check th	is box	STATES		RITIES A shington,			OMMISSION	OMB AF OMB Number: Expires:	PROVAL 3235-0287 January 31,		
if no long subject to Section 1 Form 4 c Form 5 obligatio may com <i>See</i> Instr 1(b).	5 STATEN 16. 57 Filed pur 10. 10. 10. 10. 10. 10. 10. 10.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							Estimated average burden hours per response 0.8		
(Print or Type ]	Responses)										
1. Name and Address of Reporting Person <u>*</u> POON CHRISTINE A								5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 101 WEST PROSPECT AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 05/09/2014					(Check all applicable) <u>X</u> Director <u>10%</u> Owner <u>Officer (give title</u> <u>Other (specify</u> <u>below)</u>			
			endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
CLEVELA	ND, OH 44115							Person	ore than One Rej	porung	
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative	Secu	rities Acqu	uired, Disposed of	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactic Code (Instr. 8)	(Instr. 3,	4 and (A) or	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership	
Common Stock	05/09/2014			Code V $A^{(1)}$	Amount 30	(D) A	Price \$ 197.36	30 <u>(2)</u>	Ι	Deferred Plan	
Common Stock								572 <u>(3)</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)	4. Transacti Code (Instr. 8)	5. 6. Date Exe onNumber Expiration of (Month/Day Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		Date	Amou Under Secur	le and unt of rlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) 7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
POON CHRISTINE A 101 WEST PROSPECT AVENUE CLEVELAND, OH 44115	Х						
Signatures							
Catherine M. Kilbane, Attorney-in-fact	C	5/09/2014					
<pre>#Signature of Reporting Person</pre>		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 were acquired in an exempt transaction in connection with the Director Deferred Fee Plan; Reporting Person has the right to direct the vote for such shares.
- (2) Shares listed are held pursuant to the Director Deferred Fee Plan, which includes shares acquired pursuant to the dividend reinvestment feature of such plan.
- (3) Of shares listed, 552 are restricted.

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.