ALBEMARLE CORP

Form 4

January 04, 2017

FORM 4

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

OMB 3235-0287 Number:

Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to **SECURITIES** Section 16.

January 31, Expires: 2005

OMB APPROVAL

Estimated average burden hours per response... 0.5

Form 4 or Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

30(h) of the Investment Company Act of 1940 See Instruction

1(b).

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(Print or Type Responses)

1. Name and Address of Reporting Person * NARWOLD KAREN G			2. Issuer Name and Ticker or Trading Symbol ALBEMARLE CORP [ALB]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(Last) (First) (Middle)		3. Date of Earliest Transaction	(Check all applicable)		
ALBEMARLE CORPORATION, 4350 CONGRESS STREET, SUITE 700		CONGRESS	(Month/Day/Year) 01/01/2017	Director 10% OwnerX Officer (give title Other (specify below) EVP, Chief Admin Officer		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
CHARLOTT	E, NC 2820)9	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acq	quired, Disposed of, or Beneficially Owned		

(City)	(State)	(Zip) Ta	ble I - Non-l	Derivative Securities Acc	quired, Disposed	of, or Benefici	ally Owned
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities Acquired	5. Amount of	6.	7. Nature o
Security	(Month/Day/Year)	Execution Date, if	Transaction	or(A) or Disposed of (D)	Securities	Ownership	Indirect

(Instr. 3)	(Month/Day/Year)	any (Month/Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)		Beneficially Owned Following	(D) or Indirect (I)	Beneficial Ownership (Instr. 4)		
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock							514	I	Albemarle Savings Plan (1)
Common Stock	01/01/2017		M	2,444 (2)	A	\$0	23,552	D	
Common Stock	01/01/2017		F	876 (2)	D	\$ 86.08	22,676	D	

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)

of

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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 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. Transactic Code (Instr. 8)	5. Number proof Derivative Securities 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Performance Unit	<u>(3)</u>	01/01/2017		M	2,444	(2)	<u>(4)</u>	Common Stock	2,444

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
NARWOLD KAREN G			EVP,				
ALBEMARLE CORPORATION			Chief				
4350 CONGRESS STREET, SUITE 700			Admin				
CHARLOTTE, NC 28209			Officer				

Signatures

/s/ Brian Webb, Attorney-in-fact 01/04/2017

**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).
- (1) Portion of share increase due to periodic purchases by Albemarle Savings Plan trustee.
- Performance Units granted on 2/24/2014. Performance Units vest over a 2 year period. 50% vested on 2/26/2016 and 50% vested on 1/1/2017. Shares withheld to meet tax liabilities associated with such vested Performance Units.
- (3) Each Performance Unit converts to 1 share of Common Stock.
- (4) No expiration date.

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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