#### Edgar Filing: SIMPSON MANUFACTURING CO INC /CA/ - Form 4

#### SIMPSON MANUFACTURING CO INC /CA/

Form 4 April 28, 2016

## FORM 4

#### **OMB APPROVAL**

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

Washington, D.C. 20549

January 31, Expires: 2005 Estimated average

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

burden hours per response... 0.5

Form 4 or Form 5 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).

(Print or Type Responses)

04/27/2016

Stock

1. Name and Address of Reporting Person * SIMPSON PSB FUND			2. Issuer Name <b>and</b> Ticker or Trading Symbol SIMPSON MANUFACTURING CO INC /CA/ [SSD]				s	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
							NG CO				
(Last)		(Middle)	(Month/I	of Earliest Transaction /Day/Year)				elow)	tle _X_ Other below)	Owner er (specify	
21C ORINDA WAY, SUITE 358			04/22/2016					See below (a)			
(Street) 4.			4. If Am	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mo	onth/Day/Ye	ar)			Applicable Line)	D		
ORINDA, CA 94563							_	_X_ Form filed by One Reporting Person Form filed by More than One Reporting			
OKINDA,	CA 94303						F	Person			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			Code (Instr. 3, 4 and 5)				Securities Ownership Indire Beneficially Form: Beneficially Owned Direct (D) Owner Following or Indirect (Instructor) Reported (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	04/22/2016			S	44,700	D	\$ 38.2429	1,687,940	D		
Common Stock	04/26/2016			S	10,187	D	\$ 39.0054	1,677,753	D		
Common	04/27/2016			S	1 400	D	\$ 39	1 676 353	D		

1,400

D

\$ 39

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

S

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

1,676,353

D

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#### number.

## 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	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	Title	Or		
						Exercisable	Date	ritie	Number of		
				Codo V	(A) (D)						
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships

Director 10% Owner Officer Other

SIMPSON PSB FUND 21C ORINDA WAY, SUITE 358 ORINDA, CA 94563

See below (a)

### **Signatures**

Person

/s/SHARON

SIMPSON 04/28/2016

\*\*Signature of Reporting 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).

#### **Remarks:**

(1) Simpson PSB Fund may be a 10% owner of Simpson Manufacturing Co., Inc. if it were to be deemed part of a Section 13 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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