Edgar Filing: BLACK BOX CORP - Form 4

BLACK BOZ	X CORP											
Form 4	_											
May 19, 2013												
FORM	$ 4 _{\text{UNITED}}$) статро	SECUD	ITIES AT		יערי	NCE	COMMISSION	т	OMB APPROVAL		
	UNITEL	JSIAIE					NGE		OMB Number:	3235-0287		
Check thi		Washington, D.C. 20549								January 31,		
if no long subject to	MENT O	F CHANGES IN BENEFICIAL OWNERSHIP OF						Expires: 2005				
Section 1		SECURITIES						Estimated average burden hours per				
	Form 4 or						response (
Form 5 obligatior	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											
may conti	inue. Section 17		of the Inv	•	•	· ·			n			
See Instru 1(b).	iction	50(II)	of the m	vestment	compan	y Aci	. 01 19	40				
1(0).												
(Print or Type R	Responses)											
1.37 1.4		D *						5 5 1 2 1				
Carrier h D'alternal I				Name and	Ticker or 7	Tradin	g	5. Relationship of Reporting Person(s) to Issuer				
crouch ruch			Symbol BLACK	BOX CO) R P [R R	OXI						
(Leat)	BLACK BOX CORP [BBOX]					(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of (Month/D	Earliest Transaction				XDirector10% Owner				
			-	05/15/2015				Officer (give title Other (specify				
								below)	below)			
				ndment, Dat	-			6. Individual or Joint/Group Filing(Check				
			Filed(Moli	th/Day/Year)				Applicable Line) _X_ Form filed by	One Reporting P	erson		
LAWRENC	E, PA 15055							Form filed by M Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)				5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea		on Date, if				Securities		Indirect Beneficial			
(Instr. 3)		any (Month/Day/Year)			(Instr. 3,			Beneficially Owned	(D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
		,	. ,	, ,				Following				
						(A)		Reported Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common				Coue v	Amount	(D)	Flice					
Stock,	05/15/2015			٨	5,130	٨	\$0	20.160	D			
\$.001 par	05/15/2015			А	(1)	А	(1)	29,160	D			
value												

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh		
	Director	10% Owner	Officer	Other
Crouch Richard L 1000 PARK DRIVE LAWRENCE, PA 15055	Х			
Signatures				
/s/ Ronald Basso by Power of A	05/15/2015			

hald Basso by Power of Allorney for Richard L. Crouch

**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).
- Grant of restricted stock units, 100% of which vested immediately on the date of grant, under the Black Box Corporation 2008 (1) Long-Term Incentive Plan.

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.