Edgar Filing: Exterran Corp - Form 4

Exterran Cor	р											
Form 4												
March 08, 20)16											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287		
Check this box										Expires:	January 31,	
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWN					NERSHIP OF	Estimated a	2005 average	
	Section 16.				Rľ	TIES				burden hours per		
Form 4 or										response 0		
Form 5 obligatior	1 0							•	e Act of 1934,			
may conti				•		•			1935 or Section	n		
<i>See</i> Instru 1(b).		30(h)	of the In	vestmen	it C	Company	Act of	of 194	0			
(Print or Type R	Responses)											
Way Andrew James Symbol				er Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer			
				erran Corp [EXTN]					(Check all applicable)			
(Last)	(First) ((Middle)	3. Date of	f Earliest 7	Гrаг	nsaction			(Chief)	ii uii uppiiouoio	,	
(Month/D				n/Day/Year)					X Director 10% Owner X Officer (give title Other (specify below) below)			
4444 BRITTMOORE RD 03/0			03/04/2	3/04/2016								
									· · · · · · · · · · · · · · · · · · ·	sident & CEO		
			4. If Ame	nendment, Date Original					6. Individual or Joint/Group Filing(Check			
			onth/Day/Year)					Applicable Line)				
				·					_X_ Form filed by C			
HOUSTON,	, TX 77041								Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-	Do	rivativa Sa	ouriti	os A car	uired, Disposed of	or Bonoficial	ly Owned	
1 77 1 6								_			-	
1.Title of Security	 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, i 			3. 4. Securities Acquired Transaction(A) or Disposed of (D)					5. Amount of Securities	6. Ownership Form: Direct		
(Instr. 3)	(Wolding Day) Tear	any	Code (Instr. 3, 4 and 5)						Beneficially		Beneficial	
		Day/Year) (Instr. 8)					Owned		Ownership			
									Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported Transaction(s)			
				Cada	7	Amount	or	Duias	(Instr. 3 and 4)			
Common				Code V	v	Amount	(D)	Price				
Stock	03/04/2016			A <u>(1)</u>		106,728	А	\$0	366,975	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)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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							
	Director	10% Owner	Officer	Other				
Way Andrew James 4444 BRITTMOORE RD HOUSTON, TX 77041	Х		President & CEO					
Signatures								
Valerie L. Banner, Attorney-in-fact		03/08/2016						
**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).

The award represents a grant of restricted stock under the 2015 Externa Corporation Stock Incentive Plan that vests over a three-year period of employment at the rate of one-third per year beginning on the first anniversary of the date of grant, subject to accelerated

period of employment at the rate of one-third per year beginning on the first anniversary of the date of grant, subject to accelerated vesting or forfeiture under certain condition as set out in a Change of Control Agreement, Severance Benefit Agreement and Award Notice entered into by the issuer and the reporting person.

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.