## Edgar Filing: ALBEMARLE CORP - Form 4

ALBEMARI	LE CORP											
Form 4												
February 28,	2014											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL			
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287			
	Check this box								Expires:	January 31,		
if no longer white the STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								2005				
subject to Section 1				SECUR	ITIES				Estimated average burden hours per			
Form 4 of										response 0.5		
Form 5	Filed pu	rsuant to S	Section 1	6(a) of the	e Securit	ies E	xchange	e Act of 1934,		010		
obligation	<sup>18</sup> Section $17$						•	1935 or Section	1			
may cont <i>See</i> Instru	inue.			vestment	•	· ·						
1(b).	letion					•						
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Pers	son(s) to				
Tozier Scott			Symbol					Issuer				
			ALBEN	IARLE CORP [ALB]				(Chao)	k all applicable	)		
(Last)	(First)	(Middle)	3. Date of	f Earliest Tra	ansaction			(Chech	k an applicable	)		
				Day/Year) Director 10% Own					Owner			
ALBEMAR	LE		02/27/2	14				_X_Officer (give titleOther (specify				
CORPORA	TION, 451 FLO	RIDA						below) Senior Via	below) ce Presdient &	CEO		
STREET								Semor vic		ci o		
(Street) 4. If Ame							6. Individual or Joint/Group Filing(Check Applicable Line)					
· · · · · · · · · · · · · · · · · · ·												
						_X_ Form filed by C	by One Reporting Person					
BATON RC	UGE, LA BAT	ON						Form filed by M Person	lore than One Re	porting		
ROUG								reison				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	te 2A. Deer	ned	3.	4. Securit	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year	) Execution	n Date, if	Transactio				Securities	Form: Direct			
(Instr. 3)		Code (Instr. 3, 4 and 5)				5)	Beneficially Owned		Beneficial			
		(INIOIIUI/I	Day/Year)	(Instr. 8)				Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
								Reported	(	(		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	02/07/0014						\$	29.257	D			
Stock	02/27/2014			S	116 <u>(1)</u>	D	65.22	28,357	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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	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	Relationships						
FB	Director	10% Owner	Officer	Other			
Tozier Scott ALBEMARLE CORPORATION 451 FLORIDA STREET BATON ROUGE, LA BATON ROUG			Senior Vice Presdient & CFO				
Signatures							

/s/ Jacob B. Wilson, Attorney-in-fact 02/28/2014 Date

\*\*Signature of Reporting Person

## **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 sold by reporting person pursuant to 10b5-1 plan to meet tax obligations.

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.