Edgar Filing: ALBEMARLE CORP - Form 4

ALBEMAR	LE CORP										
Form 4											
August 06, 2	2014									APPROVAL	
FORM		UNITED STATES SECURITIES AND EXCHANGE COMMISSION									
	UNITE	DSIAIES		shington			COMMISSION	OMB Number:	3235-0287		
Check th if no lon			Expires:	January 31,							
subject t	F CHANGES IN BENEFICIAL OWNERSHIP O						Estimated average				
Section 16.				SECURITIES					burden ho		
Form 4 o							response				
	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1 obligations Section 17(a) of the Public Utility Helding Company Act of 1025 or										
may con				•	•	-	•	f 1935 or Sectio	n		
See Instr		30(h)	of the Ir	ivestment	t Compa	ny Ao	ct of 194	40			
1(b).											
(Print or Type)	Responses)										
1. Name and A	2. Issue	r Name an o	d Ticker o	r Tradi	ing	5. Relationship of Reporting Person(s) to Issuer					
LaBauve Donald J. Jr.			Symbol								
			ALBEMARLE CORP [ALB]					(Charle all applicable)			
(Last)				f Earliest T	ransaction			(Check all applicable)			
(2400)	(1100)	(initiatio)		Day/Year)	ransaction			Director	10	% Owner	
				014							
CORPORATION, 451 FLORIDA				011				below) below) VP, Corporate Controller & CAO			
STREET								vi, corpor		a cao	
	(Street)	Street)		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check		
					nth/Day/Year)			Applicable Line)			
									X Form filed by One Reporting Person		
BATON RO	DUGE, LA 708	01						Form filed by I Person	More than One F	Reporting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acq	uired, Disposed o	f, or Beneficia	ally Owned	
1.Title of	2. Transaction D			3.	4. Securi		•	5. Amount of Securities	6.	7. Nature of	
Security	(Month/Day/Yea		n Date, if						Ownership	Indirect	
(Instr. 3)		any (Month/I	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				5)	2	(D) or	ect Beneficial Ownership	
		(INIOIIIII/I	Jay/ I cal)	(1130.0)				Following	Indirect (I)	(Instr. 4)	
						(\mathbf{A})		Reported	(Instr. 4)		
						(A) or		Transaction(s)			
				Code V	Amount		Price	(Instr. 3 and 4)			
Common							\$			Albemarle	
Stock	08/05/2014			Ι	4,132	А	\$ 61.98	8,842 <u>(1)</u>	Ι	Savings	
STOCK							01.90			Plan	

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)

1. Title of 3. Transaction Date 3A. Deemed 6. Date Exercisable and 7. Title and 8. Price of 9. Nt 2. 4. 5. (Month/Day/Year) Derivative Conversion Execution Date, if TransactionNumber Expiration Date Amount of Derivative Deriv Security or Exercise any Code of (Month/Day/Year) Underlying Security (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Securities (Instr. 5) Derivative (Instr. 3 and 4) Derivative Securities Security Acquired Follo (A) or Repo Disposed Trans of (D) (Insti (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
LaBauve Donald J. Jr. ALBEMARLE CORPORATION 451 FLORIDA STREET BATON ROUGE, LA 70801			VP, Corporate Controller & CAO				
Signatures							
/s/ Jacob B. Wilson, Attorney-in-fact	08	3/06/2014					
**Signature of Reporting Person		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).
- Portion of share increase due to periodic purchases by Albemarle Savings Plan trustee. (1)

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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