## Edgar Filing: GONCALVES LOURENCO - Form 4

GONCALVE Form 4 February 06,	ES LOURENC 2013	0										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMI										OMB APPROVAL		
. •		SECURITIES AND EXCHANGE C Washington, D.C. 20549					COMMISSION	OMB Number:	3235-0287			
Check this if no long subject to Section 16 Form 4 or	er <b>STATI</b> 5.	STATEMENT OF CHANGES IN BENEFIC SECURITIES						. OW	NERSHIP OF	Expires: January 31 2005 Estimated average burden hours per response 0.4		
Form 5 obligations may continue. See Instruction 1(b). 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							0.0					
(Print or Type R	esponses)											
GONCALVES LOURENCO Syn				2. Issuer Name <b>and</b> Ticker or Trading ymbol //ETALS USA HOLDINGS CORP. MUSA]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date				of Earliest Transaction 'Day/Year) 2013					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) President and CEO			
				endment, Date Original onth/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
FORT LAU	DERDALE, F	L 33308							Form filed by M Person	Nore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	Derivativ	e Sec	uriti	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	on(A) or (D) (Instr.	Dispc 3, 4 a (	osed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/05/2013			A <u>(1)</u>	19,35	0 A	Ą	\$0	1,220,835	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)

Deri Secu	ivative	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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Secur	le and ant of rlying ities . 3 and 4)	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		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
GONCALVES LOURENCO C/O METALS USA HOLDINGS CORP. 2400 E. COMMERCIAL BLVD., SUITE 905 FORT LAUDERDALE, FL 33308	X		President and CEO					
Signatures								
/s/ William A. Smith II, Attorney-in-Fact	02/06/201	3						
**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).
- Reflects an annual award of restricted stock granted as part of the Issuer's annual equity compensation program. (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. er:none">(2)The Phantom Units become payable in cash or the underlying security, to the Reporting Person commencing upon a distribution at a future date from the Vornado Realty Trust Nonqualified Deferred Compensation 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.