

### CASTLE A M & CO Reported by TIFFANY BLAIN

# FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 03/09/12 for the Period Ending 03/07/12

Address	1420 KENSINGTON ROAD
	SUITE 220
	OAK BROOK, IL 60523
Telephone	8474557111
CIK	0000018172
Symbol	CAS
SIC Code	5051 - Metals Service Centers and Offices
Industry	Misc. Fabricated Products
Sector	Basic Materials
Fiscal Year	12/31

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FORM 4	
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[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(f) of the Investment Company Act of 1940

1. Name and Add	ress of Re	porting	Person *	2	2. Iss	uer Name	e and Ti	icke	er or Tr	adir	ng Sy	mbol	1 5. Relation (Check all			Person(s)	to Issuer
Tiffany Blain				(	CAS	STLE A	M &	CC	<b>) [ C</b> A	AS	]						
(Last)	(First)	(M	iddle)	3	3. Date of Earliest Transaction (MM/DD/YYYY)								Direct	or		10% O	wner
× ,		,	,											cer (give title	e below)	Othe	er (specify
1420 KENSIN 220	GTON	ROA	D, SUI	ГЕ			3/7	7/20	)12				<sup>below)</sup> Pres., Cas	stle Meta	ls Aerosp	ace	
	(Street)					Amendme DD/YYYY)	ent, Dat	e O	riginal	File	ed		6. Individu Applicable Li		nt/Group I	Filing (Che	eck
OAK BROOF	K, IL 60	523															
(City)	(State)	(Zij	p)												Reporting Per than One Repo		n
		Table	I - Non-	-1				<u> </u>	, 			<u></u>	Beneficially	•		6.	
		2. Ti Date		2A. Deemed Execution Date, if	3. Trans Code (Instr. 8)	)	4. Securities Acquired (A) Disposed of (I (Instr. 3, 4 and		(D) Followin (D) (Instr. 3			ant of Securities Beneficially Owned ng Reported Transaction(s) and 4)			7. Nature of Indirect Beneficial Ownership		
						any	Code	v	Amount	(A) or (D)		L				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock								$\square$					22	2868		D	
Common Stock												I	53	0.49		I	Through 401(k)
																	Plan <sup>(1)</sup>
Tab	le II - De	rivative	e Securiti	ies B	enefi	icially O	wned (	e.g.	, puts,	, cal	lls, wa	arrai	nts, options,	, convert	ible secur	·ities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date	Deemed		. D Se . 8) A D	Number of perivative ecurities cquired (A) isposed of (1 nstr. 3, 4 and	or D)					ities U	nderlying Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code		(A) (I	Date Exerci	isabl	Expirat e Date	tion	Title Nu		Amount or Number of Shares	Transaction (s) (Instr. 4)	4)		
Restricted Stock Units	(2)	3/7/2012		A	9	9300		/2014 (3)	4 12/31/2		Comn Stoc	-	9300	\$ 0	9300	D	

#### **Explanation of Responses:**

- (1) Between November 30, 2011 and February 29, 2012, the reporting person's balance decreased by 0.08 shares of common stock under the A.M. Castle & Co. 401(k) Plan. The information in this report is based upon a plan statement dated as of February 29, 2012.
- (2) Each restricted stock unit represents a contingent right to receive one share of common stock of A.M. Castle & Co.
- (3) The restricted stock units vest in full on December 31, 2014, provided the reporting person is employed by A.M. Castle & Co. on the vesting date.

#### **Reporting Owners**

Penerting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Tiffany Blain									

### Signatures

### Robert J. Perna, Attorney-in-Fact 3/9/2012

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Date

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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