

## CASTLE A M & CO

# Reported by STEPHENS SCOTT F

### FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 01/02/13 for the Period Ending 12/31/12

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



[ ] 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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2. Is	2. Issuer Name <b>and</b> Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Stephens Scot	t F			CA	ST	CLE A	M	& C	CO	[ CAS	<b>S</b> :	]					
(Last)	(First)	(Midd	le)	3. D	ate	of Earl	liest T	rans	sact	tion (MN	<b>1</b> /L	DD/YYYY	) Direc	ctor	_	10% O	wner
(Eust)	(Trist)	(iviida	10)										<b>X</b> Off	ficer (give titl	e below)	Othe	r (specify
1420 KENSIN	ICTON	<b>BOAD</b>	TIII	TE			12	/31	/20	)12			below)	aident Cl	FO & Tre	96	
220 KENSII 220	GION	KOAD	, 5011						., _ 0	, _ <b>_</b>			vice rie	sident, C	ro & Tre	аѕ.	
	(Street)					nendme /YYYY)	ent, D	ate	Ori	ginal F	ile	d	6. Individual Applicable		nt/Group I	Filing (Che	eck
OAK BROOF	K, IL 60	523															
(City)	(State)	(Zip)													Reporting Per than One Rep		n
		Table I	- Non-I	Derivat	ive	Securi	ties A	cqu	iire	ed, Disp	os	sed of, o	or Beneficial	-	•	<u>orung 1 0100</u>	•
1.Title of Security (Instr. 3)			2. Trans. Date	I E I	A. Deemed Execution Date, if	3. Trans. Code (A) or Disposed (D) (Instr. 8)				ed	of Foll		ng Reported Transaction(s) and 4) Ownership Form: Benefi Direct (D) Owner			Beneficial Ownership	
					a	iny	Code	V	Amo	ount (A) or (D)	F	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				12/31/20	12		M		131	.00 A	\$1	4.77	37'	797.5 <sup>(1)</sup>		D	
Common Stock				12/31/20	12		F		411	19 D	\$1	4.77	330	678.5 (1)		D	
Tab	le II - De	rivative S	ecuritie	es Bene	efici	ially O	wned	( e.g	g.,	puts, c	all	ls, warr	ants, option	s, convert	ible secur	rities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	(Instr. 8)	De Se Ac or of (Ir an	Number of cerivative ecurities equired (A Disposed (D) nstr. 3, 4 d 5)	Exp A) I	e	on D					8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (s) (Instr. 4)	Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Restricted Stock		12/31/2012		Code V	V (A		12/			12/31/20	12	Common	Shares				
Units	(2)	12/31/2012		M		13100	12/.	J1/40	014	12/31/20	- 4	Stock	13100	\$0	0	D	

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

- (1) Amount of securities beneficially owned includes a total of 348.4 shares acquired from May 16, 2012 through October 11, 2012, via Registrant's Employee Stock Purchase Plan.
- (2) Each unit converted into a share of A.M. Castle & Co. common stock on a one-for-one basis.

Reporting Owners

reporting Owners									
Demonting Orymon Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Stephens Scott F 1420 KENSINGTON ROAD SUITE 220 OAK BROOK, IL 60523			Vice President, CFO & Treas.						

Robert J. Perna, Attorney-in-Fact

1/2/2013

\*\* Signature of Reporting Person

Date

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

- \* 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.

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.