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AIRGAS IN Form 4	NC										
July 02, 20											
FORM		STATES	SECU	RITIES /	AND EX	CHANGE			PPROVAL		
~ 1		0111110		shington				Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or					RITIES		Estimated burden hoi response	Expires:January 31, 2005Estimated averageburden hours per response0.5			
Form 5 obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17((a) of the	Public U	Jtility Hol	lding Co		nge Act of 1934, of 1935 or Secti 940				
(Print or Type	Responses)										
1. Name and SNEED PA	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer						
	(First) (Middle)		AS INC [A	-		(Check all applicable)				
(Last) C/O AIRG RADNOR: 100	3. Date of Earliest Transaction (Month/Day/Year) 06/30/2014				X_ Director 10% Owner Officer (give title Other (specify below) below)						
	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check						
				onth/Day/Yea	ur)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(State)	(Zip)	Tal	la T. Nam I	D	C	Person	of on Donoficio	lle: Oran ed		
1.Title of	2. Transaction Date	-		3.	4. Securi		cquired, Disposed		-		
Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	r) Execution Date, if any		Transactic Code (Instr. 8)	sactionAcquired (A) or		Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially ow	med directly o	or indirectly				
					Perso inforr requi	ons who res nation cont red to respo ays a curre	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					sposed of, or convertible s	Beneficially Owner securities)	1			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	ionof	Expiration Date	Underlying Securities	Derivati

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Deriv Secur Acqu (A) o Dispo of (D (Instr and 5	ities ired r osed) . 3, 4,	(Month/Day/Year)		(Instr. 3 and 4)		Security (Instr. 5
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock (1)	(2)	06/30/2014		А	12.1		(3)	(3)	Common Stock	12.1	\$ 108.

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
SNEED PAULA A C/O AIRGAS, INC. 259 N. RADNOR-CHESTER ROAD, STE. 100 RADNOR, PA 19087	Х					
Signatures						
Robert H. Young, Jr., Attorney-in-Fact for Paula Sneed	А.	07/02/2014				
<u>**</u> 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).
- (1) Acquired pursuant to Airgas, Inc.'s deferred compensation plan as a result of the reinvestment under the plan of dividends declared and paid with respect to shares of Airgas, Inc. common stock underlying the phantom stock.
- (2) Each share of phantom stock represents the right to receive the cash value of one share of Airgas, Inc. common stock.
- Shares of phantom stock are payable in cash following the reporting person's termination of service as a director with Airgas, Inc. or as(3) determined by the reporting person in accordance with the terms and conditions of the plan. The reporting person may transfer her phantom stock account into an alternative investment account under the plan at any time.
- (4) Determined based on the dollar value of the reporting person's deferred compensation plan account and the closing price per share of Airgas, Inc. common stock on the date of the transaction.

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. p>

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