

Szakmary Gary Andrew
 Form 3
 December 07, 2011

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Szakmary Gary Andrew		(Month/Day/Year)	MOOG INC [moga/mogb]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		11/30/2011		
8 GOLDFINCH CT.			(Check all applicable)	6. Individual or Joint/Group Filing(Check Applicable Line)
	(Street)		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	<input checked="" type="checkbox"/> Form filed by One Reporting Person
AMHERST, NY 14228			<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (specify below)	<input type="checkbox"/> Form filed by More than One Reporting Person
	(City)	(State)	Vice President	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Class B Common ⁽¹⁾	849	I	401 (k)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Title	Amount or Number of		

Edgar Filing: Szakmary Gary Andrew - Form 3

				Shares		(I) (Instr. 5)	
SAR <u>(2)</u>	Â <u>(3)</u>	05/20/2018	Class A Common	4,000	\$ 43.42	D	Â
SAR <u>(2)</u>	Â <u>(4)</u>	10/31/2018	Class A Common	4,000	\$ 35.12	D	Â
SAR <u>(2)</u>	Â <u>(5)</u>	12/01/2019	Class A Common	3,000	\$ 26.66	D	Â
SAR <u>(2)</u>	Â <u>(6)</u>	11/30/2020	Class A Common	4,000	\$ 36.86	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Szakmary Gary Andrew 8 GOLDFINCH CT. AMHERST, NY 14228	Â	Â	Â Vice President	Â

Signatures

Timothy P.
Balkin
Date: 12/07/2011

**Signature of Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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) Reflects shares held in Moog Inc. Retirement Savings Plan as of most recent statement to participant.
- (2) Stock Appreciation Rights (SAR) granted under the 2008 Stock Appreciation Rights Plan.
- (3) SAR exercisable as follows: 1,334 on 5/20/09, 1,333 on 5/20/10 and 1,333 on 5/20/11.
- (4) SAR exercisable as follows: 1,334 on 10/31/09, 1,333 on 10/31/10 and 1,333 on 10/31/11.
- (5) SAR exercisable as follows: 1,000 on 12/1/10, 1,000 on 12/1/11 and 1,000 on 12/1/12.
- (6) SAR exercisable as follows: 1,334 on 11/30/11, 1,333 on 11/30/12 and 1,333 on 11/30/13.

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.