### Edgar Filing: O BRIEN LAWRENCE W - Form 4

	AWRENCE W													
Form 4 November 2	28 2005													
											OMB A	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287					
Check this box if no longer									Expires:	January 31,				
Section Form 4 Form 5	S CHANGES IN BENEFICIAL OWN SECURITIES Section 16(a) of the Securities Exchange								Estimated a burden hou response	iours per				
obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17(	a) of the l		Jtility l	Hol	lding	Compa	any A	Act of	1935 or Section	1			
(Print or Type	Responses)													
1. Name and Address of Reporting Person <u>*</u> O BRIEN LAWRENCE W									5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (	Middle)	3. Date of Earliest Transaction						(Check all applicable)					
				(Month/Day/Year) 11/23/2005						Director 10% Owner X_ Officer (give title Other (specify below) below) Vice President, Treasurer				
	(Street)		4. If Am Filed(Mo				ginal			6. Individual or Joi Applicable Line)	int/Group Fili	ng(Check		
BRISTOL,	CT 06011-0489		T Heu(ini	Jiiii/Day	100					_X_ Form filed by O Form filed by M Person				
(City)	(State)	(Zip)	Tal	ole I - N	on-	Deriva	tive See	curitie	es Acqu	iired, Disposed of,	or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. 4. Securities Acquired (A Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)					red (A)	) 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	Am	ount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	11/23/2005	11/28/20	005	Ι		5,264	1.297	D	\$ 34.9	0	Ι	By 401(k) Plan		
Common Stock										38,046 <u>(1)</u>	D			
Common Stock										4,257.4379	Ι	By Employee Stk		
												Purchase Plan		

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

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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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
						Date Exercisable	Expiration Date	Title	Amount or Number of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address			Relationships				
	Director	10% Owner	Officer	Other			
O BRIEN LAWRENCE W BARNES GROUP INC. 123 MAIN STREET BRISTOL, CT 06011-0489			Vice President, Treasurer				
Signatures							
Signe S. Gates, Pursuant to a P Attorney	ower of		11/28/2005				

## **Explanation of Responses:**

\*\*Signature of Reporting Person

- \* 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) Includes 7,000 Restricted Stock Units granted 2/12/2003, 4,000 granted 4/14/2004, and 2,250 Restricted Stock Units and 2,250 Performance Share Units granted 2/16/2005 that are subject to forfeiture if certain events occur.

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.

Date