Edgar Filing: EMCOR GROUP INC - Form 4

EMCOR GRO	OUP INC											
Form 4												
June 02, 2017												
FORM	4 UNITE	D статр	SECUD	ITIES AT		• • • • •	NCE	COMMISSION	r	PPROVAL		
-	UNITE	DSIAIE		hington,			NGE		OMB Number:	3235-0287		
Check this	box		vv as	inington,	D.C. 20.					January 31,		
if no longer STATEMENT OF CHANG				GES IN BENEFICIAL OW				NERSHIP OF	Expires:	2005		
Subject to Section 16	subject to				ITIES				Estimated average burden hours per			
Form 4 or							response 0.5					
Form 5	_ ^						-	ge Act of 1934,				
obligation: may contin				•	•	- ·		of 1935 or Sectio	n			
See Instruc		30(h)	of the Inv	vestment	Company	y Act	of 19	40				
1(b).												
(Print or Type R	esponses)											
(I IIII of Type II	esponses)											
1. Name and Address of Reporting Person [*] _2. Issuer Name and Ticker or Trading 5. Relationship of Re								Reporting Person(s) to				
BERSHAD STEPHEN W Symbol								Issuer				
				R GROUP	INC [EI	ME]		(Check all applicable)				
(Last)	(Last) (First) (Middle) 3. Date of				ansaction			(Check an applicable)				
66 ARROYO HONDO TRAIL(Month/D) 06/01/20				nth/Day/Year) 01/2017				_X_ Director		b Owner		
								Officer (give title Other (specify below)				
			4. If Amer	Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mon	th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
SANTA EE	NIN 07500								Jne Reporting Pe Iore than One Re			
SANTA FE,	INIVI 87308							Person		1 0		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction I			3. 4. Securities					1	7. Nature of		
Security (Instr. 3)	(Month/Day/Ye		on Date, if TransactionAcquired (A) or Code Disposed of (D)						Form: Direct (D) or	Indirect Beneficial		
(IIIsu: 5)		any (Month	/Day/Year)	(Instr. 8) (Instr. 3, 4 and 5)					Indirect (I)	Ownership		
			•						(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or	р.	(Instr. 3 and 4)				
Common				Code V	Amount 5,347	(D)	Price					
Stock	06/01/2017			А	(1)	А	\$0	162,868 <u>(2)</u>	D			
					_							

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

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)

Edgar Filing: EMCOR GROUP INC - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	 5. ctionNumber of 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) 		Expiration Date (Month/Day/Year) e		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (I		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
The pointing of the real of the second	Director	10% Owner	Officer	Other				
BERSHAD STEPHEN W 66 ARROYO HONDO TRAIL SANTA FE, NM 87508	Х							
Signatures								
By Maxine L. Mauricio, Attorney-in-Fact	06/02/2017							
<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) The shares reported herein as acquired represents shares of common stock issuable in the future with respect to restricted stock units ("RSU's") granted to the reporting person.
- (2) Includes shares issuable in respect of RSU's.

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.