

SNAP-ON Inc
Form 4
October 30, 2014

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2015
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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 *
KASSOUF THOMAS L.

(Last) (First) (Middle)

SNAP-ON INCORPORATED, 2801
80TH STREET

(Street)

KENOSHA, WI 53143

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
SNAP-ON Inc [SNA]

3. Date of Earliest Transaction
(Month/Day/Year)

10/29/2014

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

___ Director ___ 10% Owner
 Officer (give title below) ___ Other (specify below)

Sr VP & Pres - Tools

6. Individual or Joint/Group Filing(Check Applicable Line)

Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	10/29/2014		S	V 2,620 D	\$ 129.1665 19,630	D	
Common Stock	10/29/2014		G	V 880 D	18,750	D	
Common Stock					7,403.6024	I	By 401(k)

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

SEC 1474 (9-02)

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Stock Option (Right to Buy)	\$ 50.22					02/15/2010	02/15/2017	Common Stock	6,4
Stock Option (Right to Buy)	\$ 54.5					04/30/2010	04/30/2017	Common Stock	6,00
Stock Option (Right to Buy)	\$ 51.75					02/13/2011	02/13/2018	Common Stock	20,0
Stock Option (Right to Buy)	\$ 58.94					02/09/2014	02/09/2021	Common Stock	28,0
Stock Option (Right to Buy)	\$ 60					02/08/2013 ⁽⁴⁾	02/08/2022	Common Stock	33,0
Stock Option (Right to Buy)	\$ 79.04					02/13/2014 ⁽⁴⁾	02/13/2023	Common Stock	35,0
Stock Option (Right to Buy)	\$ 109.43					02/13/2015 ⁽⁴⁾	02/13/2024	Common Stock	36,0
Restricted Stock Units	⁽⁵⁾					⁽⁶⁾	⁽⁶⁾	Common Stock	6,4
Restricted Stock Units	⁽⁵⁾					⁽⁷⁾	⁽⁷⁾	Common Stock	6,0
Restricted Stock Units	⁽⁵⁾					⁽⁸⁾	⁽⁸⁾	Common Stock	4,2
	⁽⁵⁾					⁽⁹⁾	⁽⁹⁾		7,3

Edgar Filing: SNAP-ON Inc - Form 4

If the Company achieves certain goals over the 2014-2016 period, the performance units will vest and stock will be awarded. The target number of units that may be earned is reported above; the maximum amount is 200% of the number reported.

(12) Payment will be made in accordance with the reporting person's deferral election, death, disability or termination of employment.

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.