## Edgar Filing: SCHULMAN A INC - Form 4

| Form 4  | N A INC  |   |                                   |  |   |  |             |  |   |   |  |  |
|---|--|---|-----------------------------------|--|---|--|-------------|--|---|---|--|--|
| January 15, 2   | 016  |   |                                   |  |   |  |             |  |   |   |  |  |
| FORM  | FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 |   |                                   |  |   |  |             |  | PPROVAL<br>3235-0287  |   |  |  |
| Check thi<br>if no long<br>subject to<br>Section 10<br>Form 4 or<br>Form 5<br>obligation<br>may conti<br><i>See</i> Instru<br>1(b). | er <b>STAT</b><br>6.<br>Filed I<br>nue. Section 1                              | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>20(b) of the Investment Company Act of 1940 |                                   |  |   |  |             |  | Expires:<br>Estimated<br>burden hou<br>response                               | Expires: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5 |  |  |
| (Print or Type R  | lesponses)   |   |                                   |  |   |  |             |  |   |   |  |  |
| Horton Andrean Sy   |  |   | Symbol                            | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>SCHULMAN A INC [SHLM] |   |  |             |  | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable) |   |  |  |
| (Month  |  |   | (Month/D                          | Date of Earliest Transaction<br>Ionth/Day/Year)<br>/13/2016                    |   |  |             | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>Senior Corp. Counsel                |   |   |  |  |
|   |  |   |                                   | endment, Date Original<br>nth/Day/Year)  |   |  |             | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person            |   |   |  |  |
| FAIRLAWN  | N, OH 44333  |   |                                   |  |   |  |             | Form filed by Person   | More than One R   | eporting  |  |  |
| (City)  | (State)  | (Zip)   | Table                             | e I - Non-D  | erivative S   | Securi                                     | ties Ac     | quired, Disposed o   | of, or Beneficia  | lly Owned   |  |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction (Month/Day/Yo   | ear) Executi<br>any   | emed<br>on Date, if<br>/Day/Year) | Code<br>(Instr. 8)   | 4. Securi<br>onAcquired<br>Disposed<br>(Instr. 3,<br>Amount | (A) of (D<br>d of (D<br>d and<br>(A)<br>or | )           | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)          | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)                     |  |  |
| Common<br>Stock   | 01/13/2016   |   |                                   | A  | 1,280   | A  | \$ 0<br>(1) | 1,280  | 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)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Own<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|-------|--|---|---|
|   |   |   |   | Code V                                | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |   |

## **Reporting Owners**

| Reporting Owner Name / Address                              | Relationships |           |                      |       |  |  |  |  |
|---|---------------|-----------|----------------------|-------|--|--|--|--|
|   | Director      | 10% Owner | Officer              | Other |  |  |  |  |
| Horton Andrean<br>3637 RIDGEWOOD ROAD<br>FAIRLAWN, OH 44333 |               |           | Senior Corp. Counsel |       |  |  |  |  |
| Signatures  |               |           |                      |       |  |  |  |  |
| /s/ Aaron S. Berke, attorney in fact for Andrean Horton     |               |           | 01/15/2016           |       |  |  |  |  |
| **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) Award represents a grant of restricted stock which restrictions lapse on the third anniversary of the grant date.

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.