

SENSIENT TECHNOLOGIES CORP

Form 4

December 06, 2013

FORM 4
UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

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

OMB APPROVAL

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(Print or Type Responses)

1. Name and Address of Reporting Person *
MALIN RICHARD

2. Issuer Name **and** Ticker or Trading
Symbol
**SENSIENT TECHNOLOGIES
CORP [SXT]**

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

(Last) (First) (Middle)
777 EAST WISCONSIN AVENUE
(Street)

3. Date of Earliest Transaction
(Month/Day/Year)
12/04/2013

____ Director ____ 10% Owner
☒ Officer (give title below) ____ Other (specify below)
Assistant Controller

MILWAUKEE, WI 53202

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

6. Individual or Joint/Group Filing(Check
Applicable Line)
☒ Form filed by One Reporting Person
____ Form filed by More than One Reporting
Person

(City) (State) (Zip)

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	12/04/2013		F	500 ⁽¹⁾ D \$ 48.97	11,746.874 ⁽²⁾	D	
Common Stock					4,408.582	I	ESOP ⁽³⁾
Common Stock					2,338.85	I	Savings Plan ⁽⁴⁾
Common Stock					259.791	I	Supplemental Benefit Plan ⁽⁵⁾

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.

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(9-02)

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)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Transaction (Instr. 10)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships
	Director 10% Owner Officer Other
MALIN RICHARD 777 EAST WISCONSIN AVENUE MILWAUKEE, WI 53202	Assistant Controller

Signatures

/s/ John L. Hammond, Attorney-in-Fact for Mr.
Malin

12/06/2013

__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) Shares were withheld to cover tax withholding in connection with the vesting of a prior restricted stock grant.
- (2) Includes shares of restricted stock held under Issuer's 2002 Stock Option Plan and Issuer's 2007 Stock Plan, and shares held in a dividend reinvestment plan.
- (3) Represents shares held in Issuer's ESOP as of the end of the month immediately preceding this filing.
- (4) Represents shares held in Issuer's Savings Plan as of the end of the month immediately preceding this filing.
- (5) Represents shares held in Issuer's Supplemental Benefit Plan as of the end of the month immediately preceding this filing.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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