## Edgar Filing: KAMAN Corp - Form 4

KAMAN Con	rp											
Form 4	~											
April 15, 201	_											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								т	OMB APPROVAL			
	UNITE						UL		Number:	3235-0287		
Check this box Washington, D.C. 20549						Expires:	January 31					
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O						NERSHIP OF	2003					
	subject to Section 16. SECURITIES							Estimated average burden hours per				
Form 4 or	n 4 or								response 0.5			
Form 5 obligation		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,										
may conti				•	•	- ·		f 1935 or Sectio	on			
See Instru	ction	30(h)	of the Inv	vestment	Compan	y Act	of 19	40				
1(b).												
(Print or Type R	(esponses)											
	•											
1. Name and Address of Reporting Person <u>*</u> SWIFT RICHARD J			2. Issuer	2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
			Symbol	Symbol					Issuer			
			KAMAN	KAMAN Corp [KAMN]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				()					
				(Month/Day/Year)				_X_ Director 10% Owner				
C/O KAMA			04/15/20	04/15/2015					Officer (give title Other (specify below) below)			
	ΓΙΟΝ, 1332 Β	LUE							,			
HILLS AVE	2											
	(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
	Filed(Mon	Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person					
BI OOMEIE	LD, CT 0600	2							More than One R			
DLOOMITIL	LD, CI 0000	2						Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date 2A. De		emed 3. 4. Securities				5. Amount of	6. Ownership	7. Nature of			
Security	(Month/Day/Y		on Date, if TransactionAcquired (A) or					Securities		Indirect		
(Instr. 3)		any (Month	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)			·	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
		(ivionini	(Duy) I cui)	(11301.0)	(1150.5,	i unu	5)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
17				Code V	Amount	(D)	Price	(mour o und r)				
Kaman	04/15/2015			٨	2,357	٨	\$ 0	17 292	D			
Common Stock	04/15/2015			А	(1)	A	\$0	17,283	D			
SIUCK												

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 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. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
					(Instr. 3, 4, and 5)						
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

		Relationships							
Reporting Owner Name / Ad	dress	Director	10% Owner	Officer	Other				
SWIFT RICHARD J C/O KAMAN CORPORAT 1332 BLUE HILLS AVE BLOOMFIELD, CT 06002	TION	X							
Signatures									
/s/ Richard J. Swift	04/15/2	2015							
**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) Represents an unrestricted equity award under the Corporation's 16b-3 qualified 2013 Management Incentive Plan.

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.