Edgar Filing: SMITH KEVIN MARK - Form 4

| SMITH KEV Form 4 | | | | | | | | | | | | |
|---|------------------------------------|---------------------|--|--|------------------------------|---------------|--------|--|--|--|-----------|--|
| June 01, 2012 | Л | | | | | | | | | | PPROVAL | |
| | UNITE | O STATES | | ITIES A hington | | | | IGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Section 16. Form 4 or | | | | GES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | Estimated average burden hours per | | |
| Form 5 obligation may conti <i>See</i> Instru 1(b). | ^{is} nue. Section 1' | 7(a) of the 1 | | ility Hol | ldir | ng Comj | pany | Act of | e Act of 1934, f 1935 or Section 40 | n | | |
| (Print or Type R | esponses) | | | | | | | | | | | |
| SMITH KEVIN MARK Symbol AMERIC MANUF | | | Name and Ticker or Trading CAN AXLE & FACTURING HOLDINGS | | | | - | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (Last) | (First) | (Middle) | INC [A2 3. Date of (Month/D 05/30/20 | Earliest T ay/Year) | Earliest Transaction — be | | | | Director 10% Owner X Officer (give title Other (specify below) VP Driveshaft Business Unit | | | |
| | | | endment, Date Original nth/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| | MI 48211-1198 | 3 | | | | | | | Person | lore than One Re | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-l | Der | rivative S | ecurit | ies Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction D (Month/Day/Yea | ar) Executio any | | 3. Transact Code (Instr. 8) Code V | tion(() (| (A) or Dis | sposed | of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 05/30/2012 | | | А | | 11,600 (1) | А | \$0 | 26,645 | 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)

| 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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Secur | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|---|--|--------------------|-------|--|---|--|
| | | | | Code V | . , | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|------------|-----------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| SMITH KEVIN MARK ONE DAUCH DRIVE DETROIT, MI 48211-1198 | | | VP Driveshaft Business Unit | | | | | |
| Signatures | | | | | | | | |
| Laura L. Douglas, Attorney-in-fact | | 06/01/2012 | | | | | | |
| **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) These shares represent restricted stock units (RSUs) that will be settled in common stock upon vesting. These RSUs will vest on the three-year anniversary of the date of grant.

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.