Edgar Filing: Allegion plc - Form 4

Allegion plc												
Form 4												
February 18,	2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								т	PPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287			
Check this box if no longer											January 31,	
subject to Section 1	OF CHAN	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: 2005 Estimated average burden hours per			
Form 4 or										response 0.5		
Form 5	Filed p	oursuant to	Section 1	6(a) of	the	Securiti	es Ex	chang	e Act of 1934,			
obligatior may conti				•		•	• •		f 1935 or Sectio	n		
<i>See</i> Instru 1(b).		30(h) of the In	vestme	ent (Company	/ Act	of 194	40			
(Print or Type R	Responses)											
1. Name and Address of Reporting Person <u>*</u> PETRATIS DAVID D			2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
	•	Allegion plc [ALLE]						(Chask all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest	t Tra	insaction			(Cheo	ck all applicable	e)	
			(Month/D	h/Day/Year)					X_ Director 10% Owner			
	AGE LOCK C		02/16/20	02/16/2016					_X_ Officer (give title Other (specify below) below)			
LLC, 11819 STREET	N. PENNSYI	LVANIA							· · · · · · · · · · · · · · · · · · ·	n, President &	CEO	
			4. If Ame	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Y	(ear)				Applicable Line) _X_ Form filed by One Reporting Person			
CARMEL, I	N 46032									More than One Re		
(City)	(State)	(Zip)	Tabl	e I - Noi	n-Do	erivative S	ecurit	ies Acc	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction I			3.				-	5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Ye	ar) Executi any	on Date, if	Transaction(A) or Disposed of Code (D)				of		Form: Direct (D) or	Indirect Beneficial	
(Instr. 5)			(Month/Day/Year)		Code (D) (Instr. 8) (Instr. 3, 4 and 5)				Owned	Indirect (I)	Ownership	
									Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported Transaction(s)			
				Code	v	Amount	or (D)	Price	(Instr. 3 and 4)			
Ordinary	0011610016				v				100.040	D		
Shares	02/16/2016			А		12,965	А	<u>(1)</u>	133,840	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 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. 5. Number of Transactio/Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		7. Title and Amount of Underlying Securities8(Instr. 3 and 4)9(Instr. 3 and 4)9	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 57.85	02/16/2016		A	47,289	(2)	02/16/2026	Ordinary Shares	47,289

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
PETRATIS DAVID D C/O SCHLAGE LOCK CO., LLC 11819 N. PENNSYLVANIA STREET CARMEL, IN 46032	Х		Chairman, President & CEO				
Signatures							

/s/ S. Wade Sheek, Attorney-In-Fact

**Signature of Reporting Person

02/18/2016

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) Restricted stock units that vest in equal annual installments on February 16, 2017, February 16, 2018 and February 16, 2019.

(2) A Stock Option that vest in equal annual installments on February 16, 2017, February 16, 2018 and February 16, 2019.

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.