Edgar Filing: ARGAN INC - Form 4

ARGAN INC

| Form 4 | | | | | | | | | | | |
|--|---|--|----------------|--|--|---------------------|---------------------------------|--|--|---|--|
| January 12, | _ | | | | | | | | | PROVAL | |
| FORM | A 4 UNITED | STATES | | | | | NGE CO | OMMISSION | OMB OMB Number: | 3235-0287 | |
| Washington, D.C. 20549Check this box if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OW SECURITIESForm 4 or Form 5 obligations | | | | | | xchange y Act of | Act of 1934, 1935 or Section | Expires:January 31, 2005Estimated average burden hours per response0.5 | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| BOSSELMANN RAINER H Symbol | | | | er Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (| (Middle) | | _ | - | | | (Check | all applicable |) | |
| | | | | of Earliest Transaction /Day/Year) /2015 | | | | X Director 10% Owner X Officer (give title Other (specify below) below) Chairman of the Board and CEO | | | |
| | | | | nendment, Date Original onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| DICKERS | ON, MD 20842 | | | | | | | Form filed by Mo Form filed by Mo Person | | | |
| (City) | (State) | (Zip) | Tab | ole I - Non-l | Derivative | Secur | ities Acqu | ired, Disposed of, | or Beneficial | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemo Execution any (Month/Da | ed Date, if | 3. | 4. Securit por Dispos (Instr. 3, 4 | ies Aco ed of (| quired (A) D) | 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 | 01/08/2015 | | | S | 14,444 | . / | \$ 32.8368 | 323,457 <u>(1)</u> | 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. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
| | | | | 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 | | | |
| BOSSELMANN RAINER H 16715 THURSTON ROAD DICKERSON, MD 20842 | х | | Chairman of the Board and CEO | | | | |
| Signatures | | | | | | | |
| /s/ Rainer H. Bosselmann | 01/12/202 | 15 | | | | | |

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) 2,241 shares are held by Rainer and Beverley Bosselmann, as joint tenants, and the remaining shares are held by Rainer Bosselmann.

Remarks:

Mr. Bosselmann directly owns stock options to purchase 105,000 shares of common stock.

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.