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FEDERAL S Form 4 April 23, 2014	IGNAL CORP . 4	/DE/									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									9PROVAL 3235-0287		
Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES SECURITIES LA CONNERSHIP OF SECURITIES LA CONNERSHIP OF SECURITIES LA CONNERSHIP OF SECURITIES LA CONNERSHIP OF Section 16. SECURITIES LA CONNERSHIP OF SECURITIES LA CONNERSHIP SECURITIES LA CONNERSHIP SECURITIES LA CONNERSHIP SECURITIES LA C									irs per		
(Print or Type R	esponses)										
Lind Bonnie Cruickshank Syn FE			2. Issuer Name and Ticker or Trading Symbol FEDERAL SIGNAL CORP /DE/ [fss]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				e of Earliest Transaction n/Day/Year) /2014				X_Director10% Owner Officer (give titleOther (specify below) below)			
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
OAK BROO	K, IL 60523							Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Execution any		3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (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)		
Common Stock	04/22/2014			А	4,967	А	\$0	5,229	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)	4. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	Expiration D (Month/Day/ e	6. Date Exercisable and Expiration Date (Month/Day/Year)		e and nt of lying ties 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships								
reporting o when reader , read out	Director	10% Owner	Officer	Other					
Lind Bonnie Cruickshank 1415 WEST 22ND STREET SUITE 1100 OAK BROOK, IL 60523	Х								
Signatures									
Jennifer L. Sherman, attorney-i Lind	04/23/2014								
<u>**</u> Signature of Reporting		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).

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.