Edgar Filing: PRAXAIR INC - Form 4

PRAXAIR IN	ЛС										
Form 4	6										
April 27, 201									OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287		
Check this box if no longer subject to STATEMENT OF CHANG				GES IN BENEFICIAL OW					Expires:	January 31, 2005	
								NERSHIP OF	Estimated a		
				SECUR	SECURITIES				burden hou response	•	
Form 5	Filed	pursuant to	Section 10	6(a) of th	e Securiti	ies Ex	chang	ge Act of 1934,	16300136	0.5	
obligation may conti				•	•	- ·		f 1935 or Sectio	n		
See Instru		30(h)) of the Inv	vestment	Compan	y Act	of 19	40			
1(b).											
(Print or Type R	esponses)										
1. Name and Ad	dress of Penor	ting Person *	. .	N T 1	.	. .		5 Pelationship o	f Deporting Der	son(s) to	
HALL IRA I			2. Issuer Symbol	r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
, second s				AIR INC [PX]				(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	3. Date of Earliest Transaction			(Cheo				
				h/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify			
C/O PRAXA RIDGEBUR		OLD	04/26/20	016 <u>below</u>)					below)		
MDOLDOK	(Street)		4 If Ame	ndment De	ate Original			6 Individual or L	oint/Group Fili	ng(Check	
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
								X Form filed by Form filed by M			
DANBURY,	, СТ 06810-5	113						Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-E	Derivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction						5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Y	(ear) Executi any	on Date, if TransactionAcquired (A) or Code Disposed of (D)				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
			/Day/Year)	(Instr. 8) (Instr. 3, 4 and 5)				Owned	Indirect (I)	Ownership	
						<i>(</i>))		Following Reported	(Instr. 4)	(Instr. 4)	
						(A) or		Transaction(s)			
C				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	04/26/2016			А	1,471 (1)	А	\$0	5,577.145	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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt 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			
HALL IRA D C/O PRAXAIR, INC. 39 OLD RIDGEBURY ROAD DANBURY, CT 06810-5113	Х						
Signatures							
Anthony M. Pepper, Attorney-in-Fact		04/27/2016					
<u>**</u> Signature of Reporting Person		Date					
Evalenation of Dev							

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 unit award, vesting 100% and payable in shares of Praxair Common Stock on the day before the first annual meeting of shareholders occurring after April 26, 2016 if the awardee is serving on the Praxair, Inc. Board of Directors on that vesting date.

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.