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AVEDON MA Form 4 October 04, 20											
FORM	Л							OMB A	PPROVAL		
	UNITED ST	TATES SECURI Wash	TIES AN ington, D			GE C	OMMISSION	OMB Number:	3235-0287		
Check this b if no longer subject to Section 16. Form 4 or Form 5	STATEME	Expires: Estimated a	Expires: January 31, 2005 Estimated average burden hours per								
obligations may continu <i>See</i> Instructi 1(b).											
(Print or Type Res	ponses)										
1. Name and Adda AVEDON MA	Symbol	2. Issuer Name and Ticker or Trading Symbol Ingersoll-Rand plc [IR]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Mid	C	3. Date of Earliest Transaction (Chec						k all applicable)		
C/O INGERSO COMPANY, O AVENUE	DLL-RAND DNE CENTENN	(Month/Day 09/30/20	y/Year)				Director X Officer (give below) Senio				
	dment, Date Original h/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 						
PISCATAWA	Y, NJ 08854						Person	fore than One Re	porting		
(City)	(State) (Zi	p) Table	I - Non-Der	rivative Se	ecuriti	es Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (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)			
Ordinary Shares (EDCP II)	09/30/2011		А	86.78 (1)	A	\$0	20,400.84	D			
Ordinary Shares							18,070	D			
Ordinary Shares (Restricted Share Units)							12,819	D			
Ordinary							1,302.87 (2)	I	By Plan		

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Shares

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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. Transact Code (Instr. 8)	Derivative		of Expiration Date Derivative (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Derivati Security (Instr. 5)
				Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	\$ 0	09/30/2011		А	17.5 (<u>3)</u>		(4)	(4)	Ordinary Shares	17.5	\$ 0

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
AVEDON MARCIA J C/O INGERSOLL-RAND COMPANY ONE CENTENNIAL AVENUE PISCATAWAY, NJ 08854			Senior Vice President					
Signatures								
/s/ S. Wade Sheek - Attorney-in-Fact	10/04/2	2011						
**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) Reflects acquisition of dividend equivalents paid on Company stock held through Company deferred compensation plans.

(2) Latest available information provided by the trustee of the Ingersoll-Rand Employee Savings Plan.

Trustee

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- (3) Reflects acquisition of dividend equivalents paid on Company stock held through Company supplemental compensation plans.
- (4) These Phantom Stock Units are to be settled in cash equal to the fair market value of ordinary shares multiplied by the number of phantom stock units held upon the reporting person's termination of employment with the issuer.
- (5) Amount represents an approximate number of shares based on the total market value of the reporting person's Company stock fund units, as reported by the trustee of the Company supplemental compensation plans.

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.