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ARVINMER	ITOR INC										
Form 4											
January 20, 2	2011										
FORM	ORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSIO								OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549						COMMISSION	OMB 3235-02 Number:	3235-0287		
Check thi									Expires:	January 31,	
if no long subject to	F CHANGES IN BENEFICIAL OW					NERSHIP OF	Estimated a	2005 Laverage			
Section 1		SECUR	ITIES					burden hours per			
Form 4 or Form 5								response 0.5			
obligatior	10	*					c	e Act of 1934,			
may conti				•	. .			f 1935 or Section	n		
<i>See</i> Instru 1(b).	iction	30(n)	of the In	vestment	Company	Act	01 194	+0			
(Print or Type R	Responses)										
1. Name and Address of Reporting Person <u>*</u> Craig Jeffrey A			2. Issuer Symbol	Name and	Ticker or T	rading	g	5. Relationship of Reporting Person(s) to Issuer			
			ARVIN	MERITO	R INC [A	RM]		(Chao	k all applicable	.)	
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			(Chec	k all applicable	;)	
((Month/D	ay/Year)				Director 10% Owner			
	RITOR, INC.,	2135	01/20/20	011				X Officer (give below)	e title Othe below)	er (specify	
WEST MAP	PLE ROAD							/	Sr.VP, CFO		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
				th/Day/Year	-			Applicable Line)			
								_X_Form filed by C			
TROY, MI 4	48084-7186							Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecurit	ies Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Date 2A.			3. 4. Securities Acquired				6. Ownership			
Security	(Month/Day/Y				on(A) or Dis	sposed	of			Indirect Beneficial	
(Instr. 3)		any (Month/	Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)			2	· /	Ownership		
		×						Following ((Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or		(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price				
Common Stock	01/20/2011 <u>(</u>	1)		А	26,650	А	\$ 0 (2)	273,087 <u>(3)</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)

1. Title of 3. Transaction Date 3A. Deemed 7. Title and 8. Price of 2. 4. 5. 6. Date Exercisable and Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date Amount of Derivative Security or Exercise any Code of (Month/Day/Year) Underlying Security Price of (Month/Day/Year) (Instr. 8) (Instr. 5) (Instr. 3) Derivative Securities (Instr. 3 and 4) Derivative Securities Security Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares

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Reporting Owners

Reporting Owner Name / Address	Relationships							
I O	Director	10% Owner	Officer	Other				
Craig Jeffrey A ARVINMERITOR, INC. 2135 WEST MAPLE ROAD TROY, MI 48084-7186			Sr.VP, CFO					
Signatures								
Jeffrey A. Craig, by Barbara Nattorney-in-fact	ovak,	01/20/2011						
**Signature of Reporting P	erson		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) Date of shareholder approval at 2011 Annual Meeting of amendments to 2010 Long-Term Incentive Plan under which grant was made on December 1, 2010, subject to such sharheolder approval.
- (2) inapplicable
- Total also includes 16,388 shares of restricted stock that are held by the issuer to implement restrictions on transfer unless and until (3) certain conditions are met and 214,650 restricted stock units, each of which represents the right to receive one share of common stock upon the vesting date, subject to terms and conditions.

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.

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