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Noranda Aluminum Holding CORP Form 4 December 04, 2014

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION	OMB A	PPROVAL						
Washington, D.C. 20549	OMB Number:	3235-0287						
Check this box if no longer subject to Section 16. Form 4 or	Expires:January 31, 2005Estimated average burden hours per response0.5							
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								
(Print or Type Responses)								
1. Name and Address of Reporting Person * Rolfe Ronald S2. Issuer Name and Ticker or Trading Symbol5. Relationship of I Issuer	5. Relationship of Reporting Person(s) to Issuer							
Noranda Aluminum Holding CORP [NOR] (Check	(Check all applicable)							
(Last) (First) (Middle) 3. Date of Earliest TransactionX_ Director (Month/Day/Year)Officer (give t	title Oth	b Owner er (specify						
801 CRESCENT CENTRE12/02/2014DRIVE, SUITE 600	below) below)							
Filed(Month/Day/Year) Applicable Line)								
FRANKLIN, TN 37067 _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of,	, or Beneficial	lly Owned						
1.Title of Security (Instr. 3) 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. 1.Title of Security (Instr. 3) 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. 1.Title of Security (Instr. 3) (Month/Day/Year) Execution Date, if any TransactionAcquired (A) or Securities 9. (Instr. 3) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned 9. (A) (A) (A) (A) (A) 7.	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)							
Code V Amount (D) Price (Instr. 3 and 4)								
Common stock 12/02/2014 A 9,741 A $\stackrel{\$ 0}{(1)}$ 51,187.2025	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
r g the second	Director	10% Owner	Officer	Other			
Rolfe Ronald S 801 CRESCENT CENTRE DRIVE SUITE 600 FRANKLIN, TN 37067	Х						
Signatures							
/s/ Gail E. Lehman, Attorney-in-Fact for Ronald S. Rolfe			12/04/2014				
**Signature of Reporting Person				Date			
Rolfe			12/04/2014 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).

Reports a grant of 9,741 time-based restricted stock units awarded on December 2, 2014, which represents 50% of Mr. Rolfe's Annual Director Fee for the each quarter in 2015, calculated as follows (\$75,000 annual fee divided by 4 quarters = \$18,750 per Qtr.; \$18,750

(1) divided by 50% = \$9,375 * 4 quarters = \$37,500 @ FMV on Grant Date of 12/2/14 of \$3.85 = 9,741 shares). Such award shall vest as Common Stock as follows: 25% on 3/31/15, 6/30/15, 9/30/15, and 12/31/15. The award is subject to partial or full acceleration or cancellation upon certain terminations of employment.

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.