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BARNES G	ROUP INC										
Form 4											
February 16									0145		
FORM	14 UNITED 9	STATES	SECUR	ITIES A	ND EX	СНА	NGE	COMMISSIO	NT	APPROVAL	
				shington,			IUCL	commissio	Number:	3235-0287	
Check th				0 /					Expires:	January 31	
if no longer subject to Section 16. Form 4 or			CHAN	GES IN I SECUR		ICIA	L OV	VNERSHIP OI	F Estimate	ted average hours per	
Form 5 obligatio may com <i>See</i> Instr 1(b).	ns Section 17(a	a) of the P	ublic U		ling Con	npany	y Act	ge Act of 1934 of 1935 or Sect 940			
(Print or Type]	Responses)										
MILZCIK GREGORY F Symbol			Name and			ng	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N	fiddle)	3. Date of	Earliest Tr	ansaction	-		(Ch	eck all applica	ble)	
(Month/D BARNES GROUP INC., 123 MAIN 02/15/20 STREET				ay/Year)				_X_ Director10% Owner _X_ Officer (give title Other (specify below) below) EVP & COO, BGI; Pres. A.Spring			
BRISTOL,	(Street) CT 06011-0489			ndment, Da hth/Day/Year)	-	1		6. Individual or Applicable Line) _X_ Form filed b Form filed by Person		Person	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities A	cquired, Disposed	of, or Benefic	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	unsaction Date 2A. Deemed		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price				5. Amount of Securities6. OwnershipBeneficiallyForm: DirectOwned(D) orFollowingIndirect (I)Reported(Instr. 4)Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/15/2006			A <u>(1)</u>	8,500	А	\$0	130,916 <u>(3)</u>	D		
Common Stock	02/15/2006			A <u>(2)</u>	4,000	А	\$0	134,916 <u>(3)</u>	D		
Common Stock								744.6152	I	By Company's Employee Stock Purchase Plan	

1

3,305.645

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Common
Stock

By Company's 401(k) Plan

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. Transac Code (Instr. 3		5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) f		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Sha
Stock Option-Right to Buy	\$ 37.255	02/15/2006		А		16,000		(4)	02/15/2016	Common Stock	16,00

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
MILZCIK GREGORY F BARNES GROUP INC. 123 MAIN STREET BRISTOL, CT 06011-0489	Х		EVP & COO, BGI; Pres. A.Spring						
Signatures									
Signe S. Gates, pursuant to a Power of Atty			/16/2006						

**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) Reporting Person has received 8,500 Restricted Stock Units that are subject to forfeiture if certain events occur.

(2) Reporting Person has received 4,000 Performance Share Awards that are subject to forfeiture if certain events occur.

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- (3) Includes 22,000 Restricted Stock Units granted 2/12/03, 12,000 granted 4/14/04 and 6,750 Restricted Stock Units and 6,750 Performance Share Awards granted 2/16/05 that are subject to forfeiture if certain events occur.
- (4) The options vest at the rate of 33.334% on the 18th month and 33.333% on the 30th and 42nd months beginning 2/15/06.
- (5) 1 for 1.

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.