

MERITOR INC  
Form 3/A  
August 11, 2015

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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)

<p>1. Name and Address of Reporting Person *</p> <p>Heffron Timothy J.</p> <p>(Last) (First) (Middle)</p> <p>C/O MERITOR, INC., 2135 WEST MAPLE ROAD</p> <p>(Street)</p> <p>TROY, MI 48084</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>04/29/2015</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>MERITOR INC [MTOR]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) VP, HR &amp; CIO</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>05/08/2015</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
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**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock <sup>(1)</sup>	41,844 <sup>(2)</sup>	D	
Common Stock <sup>(1)</sup>	11,555 <sup>(3)</sup>	I	Meritor Savings Plan

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)
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## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Heffron Timothy J. C/O MERITOR, INC. 2135 WEST MAPLE ROAD TROY, MI 48084	^	^	^ VP, HR & CIO	^

## Signatures

/s/ Timothy J. Heffron, By: Sandra J. Quick, Attorney-in-Fact 08/11/2015

\*\*Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- This amendment to Form 3 is being filed solely for the purpose of filing Mr. Heffron's Power of Attorney dated April 29, 2015. His securities holdings listed on the Form 3 filed on May 8, 2015 are restated only to gain access to the EDGAR system for the purpose of filing the Power of Attorney.
- (1) Includes 41,844 Restricted Share Units ("RSUs"), each of which represents the right to receive one share of common stock of Meritor, Inc. ("Meritor") upon the vesting date, which occurs three years from the date of grant or earlier, upon termination of employment with Meritor under certain circumstances.
  - (2) Shares purchased periodically and held in Meritor common stock funds in an employee benefit trust fund established under the Meritor, Inc. Savings Plan, based on information furnished by the plan administrator as of April 30, 2015.

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**Remarks:**  
 Exhibit List: ^ ^ Exhibit 24-Power of Attorney

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.