Edgar Filing: TRIUMPH GROUP INC - Form 4

TRIUMPH C	GROUP INC											
Form 4												
May 02, 2013	3											
FORM	14								OMB AI	PPROVAL		
	UNITED	STATES		ITIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check thi									Expires:	January 31,		
if no long subject to		AENT O	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF	Estimated a	2005		
Section 16.					ITIES				burden hours per			
Form 4 or					~ .				response	0.5		
Form 5 obligatior	no -						-	e Act of 1934,				
may conti				•	•	· ·		f 1935 or Sectio	n			
See Instru	uction	30(n)	of the In	vestment	Compan	y Act	OI 194	40				
1(b).												
(Print or Type R	Responses)											
	•											
1. Name and A	ddress of Reporting	Person [*]	2. Issuer	Name and	Ticker or '	Fradin	g	5. Relationship of	Reporting Pers	son(s) to		
FRISBY JEFFRY D Symbol				C				Issuer				
			TRIUM	PH GRO	UP INC	TGI]	(Chao	le all applicable	.)		
(Last)	(First) (1	Middle)	3. Date of	Earliest Tra	ansaction			(Chec	k all applicable	;)		
(Month/				onth/Day/Year)				_X_ Director	Owner			
899 CASSA	TT ROAD, SUI	TE 210	05/01/20)13				X Officer (give below)	e title Othe below)	er (specify		
								· ·	ident and CEO			
	(Street)		4 If Ame	ndment, Da	te Original			6 Individual or Io	oint/Group Filir	10(Check		
				(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
			,	•				_X_ Form filed by 0				
BERWYN, I	PA 19312							Form filed by M Person	Iore than One Re	eporting		
(City)	(State)	(Zip)			• .• .	· ·			6 D 64 I 1			
())		-						uired, Disposed of		•		
1.Title of	2. Transaction Dat		med on Date, if	3. Transportio				5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		
Security (Instr. 3)	(Month/Day/Year)	any	on Date, n	Code	on(A) or Di (D)	sposed	u 01	Beneficially	(D) or	Beneficial		
		•	Day/Year)	(Instr. 8)	· · /			Owned	Indirect (I)	Ownership		
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Code V	Amount	or	Driag	(Instr. 3 and 4)				
Common					Amount		Price \$					
Stock	05/01/2013			F	561 <u>(1)</u>	D	ф 79.4	74,264	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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	Expiration Da (Month/Day/ e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addr	ess	Relationships							
	Director	10% Owner	Officer	Other					
FRISBY JEFFRY D 899 CASSATT ROAD SUITE 210 BERWYN, PA 19312	Х		President and CEO						
Signatures									
Jeffry D. Frisby	05/02/2013								
<u>**</u> 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).
- The disposition consisted of shares of company stock withheld by the company to satisfy tax withholding obligations of the reporting (1) person arising upon the lapse of restrictions on restricted stock, the acquisition of which was previously reported.

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.