## Edgar Filing: Soto Gabriel - Form 4

Soto Gabriel											
Form 4											
May 08, 2012	2										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no longe							Expires:	January 31,			
subject to	<b>CHAN</b>			CIA	LOW	NERSHIP OF	Estimated a	2005 average			
Section 16				SECURITIES					burden hours per		
Form 4 or Form 5					a	-			response 0.5		
obligation	- ·						-	ge Act of 1934,	-		
may contin	nue. Section 17(a			vestment (	•	- ·		f 1935 or Sectio	n		
See Instruction 1(b).	ction	30(II) (		estinent v	company	y Act	01 19	40			
1(0).											
(Print or Type R	esponses)										
				Name and	8			-	. Relationship of Reporting Person(s) to		
Soto Gabriel	Symbol SUPERIOR INDUSTRIES INTERNATIONAL INC [SUP]					Issuer (Check all applicable)					
			INTERN	NATIONA	AL INC [	SUP	J				
(Last)	(First) (M	liddle)		Earliest Tra	insaction			Director X Officer (give		o Owner er (specify	
7800 WOOD	NEVAVE		(Month/Da)	-				below)	below)	er (speeny	
7800 WOOL			05/04/20	112				V	ice President		
			4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
VANNUIS	, CA 91400							Person			
(City)	(State) (	Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Date	2A. Deer	ned	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)		on Date, if TransactionAcquired (A) or Code Disposed of (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month/I						Beneficially Owned		Beneficial Ownership	
			<i>Juj</i> /1001)	(msu: 0)	(msu: 5,	i una	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price				
Common Stock	05/04/2012 <u>(1)</u>			А	1,200	А	\$0	6,700	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)

## Edgar Filing: Soto Gabriel - Form 4

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. Transactic Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	ivative Expiration Date (Month/Day/Year) red sed of 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Prio Deriv Secur (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 16.76	05/04/2012		А	3,000	<u>(1)</u>	05/04/2022	Comon Stock	3,000	\$ 10

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Soto Gabriel 7800 WOODLEY AVE VAN NUYS, CA 91406			Vice President				
Signatures							
/s/ Stephen H. Gamble as Attorney-in-Fact		05/0	8/2012				
<u>**</u> Signature of Reporting Person		Γ	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) The award vests 33% on 05/04/2013, 34% on 05/04/2014 and 33% on 05/04/2015.

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.