Edgar Filing: Otter Tail Corp - Form 4

Otton Tail C

Otter Tail Co	orp											
Form 4												
April 14, 201	5											
FORM		OMB APPROVAL										
	UNITED	STATES		ITIES A hington,			NGE	COMMISSION	OMB Number:	3235-0287		
Check thi									Expires:	January 31,		
if no longer subject to STATEMENT OF CHAN				GES IN I	BENEFI	CIA	LOW	NERSHIP OF		2005 I average		
Section 1						SECURITIES				irs per		
Form 4 or	r								response 0.5			
Form 5 obligatior	• · · · ·							ge Act of 1934,				
may conti				•	•	- ·		of 1935 or Section	on			
See Instru		30(h)	of the Inv	vestment	Company	y Act	: of 19	40				
1(b).												
(Print or Type Responses)												
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to									son(s) to			
O'KEEFE TIMOTHY J Symbol				-				Issuer				
				Tail Corp [OTTR]				(Check all applicable)				
(Last)	(First) (I	Middle)	3. Date of	f Earliest Transaction				(Check an applicable)				
(Month/D			th/Day/Year)				_X_ Director		6 Owner			
215 S CASCADE ST 04/13/			04/13/20	3/2015				Delow) Officer (give title Other (specify below)				
(Street) 4. If Amer			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check					
Filed(Mont							Applicable Line)					
X Form filed by One Reporting Person												
FERGUS FA	ALLS, MN 5653	/-2801						Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Dat			3.	4. Securi			5. Amount of	6. Ownership			
Security (Month/Day/Year) Execution Date, if			on Date, if	TransactionAcquired (A) or Code Disposed of (D)				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(Instr. 3) any (Month/Day/Year)			• • •				Owned	Indirect (I)	Ownership			
				Following (Instr. 4) (Instr. 4)								
						(A)		Reported Transaction(s)				
						or		(Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	(
Common Stock	04/13/2015			А	1,900 (1)	А	<u>(2)</u>	4,000 (3)	D			
STOCK					<u>(-)</u>							

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	ionNumber of				Amou Unde Secur	tle and unt of vrlying rities :. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
O'KEEFE TIMOTHY J 215 S CASCADE ST FERGUS FALLS, MN 56537-2801	Х							
Signatures								
/s/ Timothy J O'Keefe by Ella Leapa Attorney-in-Fact		04/14/2015						
<u>**</u> Signature of Reporting Perso	n			Date				
Explanation of Poon	oncod	`						

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).
- Shares of Common Stock acquired under the 2014 Stock Incentive Plan, which is a grant of Restricted Stock. The 1,900 shares granted on (1) 4/13/2015 vest 25% yearly commencing on 4/8/2016.
- (2) The grant has a FMV of \$31.775.
- (3) Total direct holdings include shares acquired pursuant to Restricted Stock Award distributions.

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.