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OLIN COR Form 4	2P											
February 19	ЛЛ									OMB AP	PROVAL	
	UNITED	STATES				D EXCH D.C. 20549		E CON	IMISSION	OMB Number:	3235-0287	
Check t if no lo subject Section Form 4 Form 5 obligati may co <i>See</i> Insi 1(b).	to or Filed pu ntinue.	rsuant to S (a) of the P	ection Public U	SECU 16(a) of t Jtility Ho	the Soldir	FIES Securities	Exch ny A	ange A ct of 19	RSHIP OF ct of 1934, 35 or Section	Expires: Estimated av burden hour response		
(Print or Type	e Responses)											
Sumner R Nichole Symbo				Issuer Fund Frence of Frauing					Relationship of Reporting Person(s) to suer (Check all applicable)			
	(First) CORPORATION ELET PLAZA, S	I , 190		of Earliest Day/Year) 2016		saction			Director K Officer (give t ow)	10%	Owner · (specify	
CLAYTO	(Street) N, MO 63105			nendment, l onth/Day/Ye		Original		Apj _X_	ndividual or Join plicable Line) _ Form filed by Or Form filed by Mo	ne Reporting Per	son	
(City)	(State)	(Zip)	Tal	ble I - Non	-Der	ivative Secu	urities		d, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day	d Date, if	3. Transactio Code	4. S orDis (Ins	Securities Adsposed of (D str. 3, 4 and Amount	cquire)	-	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock \$1 par value									3,689	D		
Common Stock \$1 par value	02/17/2016			Ι	1,2	263.6303	А	\$ 14.33	1,263.6303 (1)	Ι	By ESOP Trustee	
Common Stock \$1 par value	02/17/2016			Ι	2,2	214.0578	А	\$ 14.45	3,477.6881 (1)	Ι	By ESOP Trustee	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own 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							
Treforming Connect tumor transcos	Director	10% Owner	Officer	Other					
Sumner R Nichole C/O OLIN CORPORATION 190 CARONDELET PLAZA, SUITE 1 CLAYTON, MO 63105	530		VP & Controller						
Signatures									
/s/ T. E. Murphy, Attorney-in-Fact	02/19/2016								
**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 figure represents shares of Olin Common Stock held under the Olin Common Stock Fund of the Olin Corporation Contributing (1) Employee Ownership Plan (CEOP), a tax conditioned plan reflecting transactions exempt under Rule 16b-3, as reported by the CEOP

Plan Administrator as of February 19, 2016.

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.