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ROCKWEL Form 4 April 03, 20	L COLLINS INC											
FORM										OMB AF	PROVAL	
UNITED STATES			SECURITIES AND EXCHANGE COMMISSI Washington, D.C. 20549							OMB Number:	3235-0287	
Washington, D.C. 20549Check this box if no longer subject to Section 16.Section 16.Form 4 or Form 5 obligations may continue.See Instruction 1(b).							Expires: Januar Estimated average burden hours per response					
(Print or Type I	Responses)											
Ortberg Robert Kelly Syr			Symbol	2. Issuer Name and Ticker or Trading Symbol ROCKWELL COLLINS INC [COL]					5. Relationship of Reporting Person(s) to Issuer			
(Last)						ansaction			(Check all applicable)			
M/S 124-32 NE	3, 400 COLLINS		(Month/D 04/01/2	-	.)				_X_ Director _X_ Officer (give below) CEC		Owner er (specify	
CEDAR RA	(Street) APIDS, IA 52498		4. If Ame Filed(Mor			te Original			6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M Person	one Reporting Pe	rson	
(City)	(State) (Zip)	Tabl	e I - No	n-D	erivative (Securi	ities Aca	uired, Disposed of,	or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deemed			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4) (Instr. 4)		
Common Stock	04/01/2015			Code M <u>(1)</u>	V	Amount 4,961	(D) A	Price \$ 44.85	$(11517 \circ 1112 \circ 1)$ 61,258.474 (2)	D		
Common Stock	04/01/2015			F <u>(1)</u>		1,040	D	\$ 96.06	60,218.474	D		
Common Stock	04/01/2015			S <u>(1)</u>		2,732	D	\$ 96.12	57,486.474 (2)	D		
Common Stock	04/02/2015			M <u>(1)</u>		1,539	А	\$ 44.85	59,025.474 (2)	D		
Common Stock									4,582.9138 (<u>3)</u>	I	By Savings Plan	

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. I Dei Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy) (4)	\$ 44.85	04/01/2015		М	4,961	(5)	11/17/2015	Common Stock	4,961	
Stock Option (Right to Buy) (4)	\$ 44.85	04/02/2015		М	1,539	(5)	11/17/2015	Common Stock	1,539	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Ortberg Robert Kelly M/S 124-323 400 COLLINS ROAD NE CEDAR RAPIDS, IA 52498-0001	Х		CEO & President				
Signatures							

Vaughn M.	
Klopfenstein	04/03/2015
<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).
- (1) The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 26, 2015.
- (2) Includes shares acquired under the Company's employee stock purchase plan and based on information furnished by the Plan Administrator as of March 3, 2015.
- (3) Shares represented by Company stock fund units under the Company's tax-qualified savings plan, including shares acquired on a periodic basis pursuant to the Plan, based on information furnished by the Plan Administrator as of April 1, 2015.
- (4) Employee stock options granted pursuant to the Company's stock based plans.
- (5) The options are currently exercisable.

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.