Edgar Filing: SMITH GARY ALLEN - Form 4

SMITH GA Form 4 March 12, 2	RY ALLEN										
FORM	ЛЛ									PPROVAL	
	UNITED	STATES		RITIES A			NGE	COMMISSION	OMB Number:	3235-0287	7
Section 16. Form 4 or Form 5 shlipping Filed pursuant to Section				ANGES IN BENEFICIAL OWNERSHIP OF SECURITIES n 16(a) of the Securities Exchange Act of 1934, c Utility Holding Company Act of 1935 or Section					Estimated burden hou response	Estimated average burden hours per response 0.5	
See Inst 1(b).		30(h)	of the I	nvestment	t Compa	ny Act	of 1	940			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> SMITH GARY ALLEN		Person [*]	2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer					
			HIBBE	ETT SPOF	RTS INC	E [HIBI	B]	(Che	ck all applicabl	e)	
(Last) 451 INDUS	(First) (Middle)		of Earliest T Day/Year) 2012	ransaction			Director X Officer (giv below) CF		% Owner her (specify	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
BIRMING	HAM, AL 35211							Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	e Securit	ties A	cquired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed	l (A) or l of (D) 4 and 5))	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(A) or (D) H	Price	Transaction(s) (Instr. 3 and 4)			
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned dire	ectly o	or indirectly.			
					Perso	ons whe	o res	pond to the colle ained in this form		SEC 1474 (9-02)	

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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8.1
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	De
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Sec

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of					(
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Unit	\$ 0	03/08/2012		A		15,375		<u>(1)</u>	<u>(1)</u>	Common Stock	15,375	
Restricted Stock Unit	\$ 0	03/08/2012		А		6,000		(2)	(2)	Common Stock	6,000	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SMITH GARY ALLEN			CFO &					
451 INDUSTRIAL LANE			Senior					
BIRMINGHAM, AL 35211			VP					

Signatures

/s/ Gary Smith	03/12/2012
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<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Performance-based RSU award under Amended 2005 Equity Incentive Plan. Three year cliff vest from date of grant 3/17/2009.
 Performance certified achieved by Compensation Committee on 3/8/2012. Reporting person has met retirement eligibility; the units will convert to common stock upon the earlier of the third anniversary of the date of grant of 3/17/2009 or upon retirement.

Performance-based RSU award under Amended 2005 Equity Incentive Plan. Performance certified achieved by Compensation
 (2) Committee on 3/8/2012. Reporting person has met retirement eligibility; the units will convert to common stock upon the earlier of the fifth anniversary of the date of grant of 3/16/2011 or upon retirement.

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.

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