Edgar Filing: McCormick Robert L - Form 4

| McCormick I Form 4 May 06, 2010 | | | | | | | | | | | |
|---|--|-----------------|---|--|----------------------------------|----------------------|-------------|---|--|-----------|--|
| FORM | Δ ΄ | | | | | | | | | PROVAL | |
| | UNITED | STATES | | | ND EX(D.C. 20: | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Section 16. | | | | GES IN BENEFICIAL OWNERSHIP SECURITIES | | | | | Expires: January 3 200 Estimated average burden hours per | | |
| Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b). | Filed pur s Section 17(| a) of the I | | ility Hol | ding Com | ipany | Act of | e Act of 1934, f 1935 or Sectio 40 | response n | 0.5 | |
| (Print or Type R | esponses) | | | | | | | | | | |
| McCormick Robert L Symbol DOUGI | | | Symbol | r Name and Ticker or Trading LAS DYNAMICS, INC [] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) (First) (Middle) 3. Date of (Month/D C/O DOUGLAS DYNAMICS, 05/04/20 INC., 7777 NORTH 73RD ST. | | | | - | | | | Director 10% Owner X Officer (give title Other (specify below) below) below) VP, CFO, Treasurer, Secretary | | | |
| | (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 Form filed by More than One Reporting | | | |
| MILWAUK | EE, WI 53223 | | | | | | | Person | Tore than One Ke | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-I | Derivative S | Securit | ties Acc | uired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | Executio any | | Code | on(A) or Di (D) (Instr. 3, | 4 and 5 (A) or | l of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect | |
| Common Stock | 05/04/2010 | | | А | 54,114 (1) | A | \$ 0 (1) | 54,114 | 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)

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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. Transactic Code (Instr. 8) | 5. ofNumber 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 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 | | | | |
| McCormick Robert L C/O DOUGLAS DYNAMICS, INC. 7777 NORTH 73RD ST. MILWAUKEE, WI 53223 | | | VP, CFO, Treasurer, Secretary | | | | | |
| Signatures | | | | | | | | |
| /s/ Timothy J. Hart as Attorney-in-Fac McCormick | ert | 05/06/2010 | | | | | | |
| **Signature of Reporting Per | son | | 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) Represents shares of restricted stock granted immediately prior to the effectiveness of the Issuer's Registration Statement on Form 8-A. The restricted stock vests in five equal annual installments.

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.