

MOOG INC.
Form 4
November 17, 2015

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2015
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
KAYSER KRAIG H

(Last) (First) (Middle)

SENECA ST & JAMISOND RD

(Street)

EAST AURORA, NY 14052

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
MOOG INC. [MOGA/MOGB]

3. Date of Earliest Transaction
(Month/Day/Year)
11/16/2015

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
Class A Common	11/16/2015		M	V Amount (A) or (D) Price 1,538 A \$ 28.94	21,528	D	
Class B Common (1)					80,000	I	Seneca Foods Pension Trust
Class A Common (1)					152,000	I	Seneca Foods Pension Trust

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

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SEC 1474
(9-02)

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. Transaction Code (Instr. 8)	5. Number of 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. Amount or Number of Shares
				Code	V	(A)	(D)	Title	
Option to Buy <u>(2)</u>	\$ 28.94	11/16/2015		M		1,538		Class A Common	1,538
Option to Buy <u>(2)</u>	\$ 36.67							Class A Common	1,538
Option to Buy <u>(2)</u>	\$ 42.45							Class A Common	1,538
SAR <u>(3)</u>	\$ 35.12							Class A Common	1,500
SAR <u>(3)</u>	\$ 26.66							Class A Common	1,125
SAR <u>(3)</u>	\$ 36.86							Class A Common	1,500
SAR <u>(3)</u>	\$ 41.82							Class A Common	1,500
SAR <u>(3)</u>	\$ 36.41							Class A Common	1,500
SAR <u>(3)</u>	\$ 61.69							Class A Common	2,000
SAR <u>(3)</u>	\$ 74.38							Class A Common	2,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
KAYSER KRAIG H SENECA ST & JAMISOND RD EAST AURORA, NY 14052		X		

Signatures

Timothy P. Balkin, as Power of Attorney for Kraig H. Kayser 11/17/2015

__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) Owned by Seneca Foods Corporation Employee's Pension Trust, of which Mr. Kayser is a beneficiary and one of the trustees with joint voting power. Mr. Kayser's beneficial interest is limited to receiving certain retirement benefits from employment.
- (2) Option to buy granted under the 1998/2003 Incentive Stock Option Plan.
- (3) Stock Appreciation Right (SAR) granted under the 2008 Stock Appreciation Rights Plan.

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.