Edgar Filing: SHERMAN FLOYD F - Form 4

| SHERMAN Form 4 | FLOYDF | | | | | | | | | | |
|--|---|--|---|---|-------------|-----------|--|--|---|---------------------|--|
| February 07, | 2012 | | | | | | | | | | |
| FORM | | | | | | | | | | PROVAL | |
| | UNITED | STATES | | shington, | | | NGE C | COMMISSION | OMB Number: | 3235-0287 | |
| Check thi if no long | | | | aF | | | | | Expires: | January 31, 2005 | |
| subject to Section 1 Form 4 or | 6. SIAIEN | IENT O | OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | Estimated average burden hours per response 0 | | |
| Form 5 obligation may cont <i>See</i> Instru 1(b). | ns inue. Section 17(a | 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 F | Responses) | | | | | | | | | | |
| SHERMAN FLOYD F Symbol | | | r Name and Ticker or Trading s FirstSource, Inc. [BLDR] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) | (First) (N | /liddle) | | Earliest Tr | | | , Kj | (Check | k all applicable | :) | |
| (Month/D 2001 BRYAN STREET, SUITE 02/03/20 1600 | | | | Day/Year) | | | | X Director 10% Owner X Officer (give title Other (specify below) below) CEO and President | | | |
| | (Street) | | 4. If Ame | ndment, Da | te Original | | | 6. Individual or Jo | int/Group Filir | 1g(Check | |
| DALLAS, T | TX 75201 | | Filed(Mon | th/Day/Year) |) | | | Applicable Line) _X_ Form filed by C Form filed by M Person | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative S | Securi | ties Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | med on Date, if Day/Year) | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common | | | | Code V | Amount | or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Stock, par value \$0.01 per share | 02/03/2012 | | | F | 20,828 | D | \$ 2.98 | 290,077 | 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.

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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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur 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 / Addres | SS | Relationships | | | | | | | |
|--|------------|---------------|-------------------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| SHERMAN FLOYD F 2001 BRYAN STREET SUITE 1600 DALLAS, TX 75201 | Х | | CEO and President | | | | | | |
| Signatures | | | | | | | | | |
| /s/ Floyd Sherman | 02/07/2012 | | | | | | | | |

<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).

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.