## Edgar Filing: CIPOLLONE JOSEPH B - Form 4

| CIPOLLONI                           | E JOSEPH B   |                         |             |  |             |        |              |   |                                      |                        |  |
|-------------------------------------|--|-------------------------|-------------|--|-------------|--------|--------------|---|--------------------------------------|------------------------|--|
| Form 4                              |  |                         |             |  |             |        |              |   |                                      |                        |  |
| March 02, 20                        | 012  |                         |             |  |             |        |              |   |                                      |                        |  |
| FORM                                | 4  |                         | CECUD       |  |             |        |              |   |                                      | PPROVAL                |  |
| . •                                 | UNITED S   | STATES                  |             |  |             |        | NGE (        | COMMISSION                                | OND                                  | 3235-0287              |  |
| Check thi                           | s box  |                         | vv as       | nington,   | D.C. 20     | 549    |              |   | Number:                              | January 31,            |  |
| if no longer STATEMENT OF CHANCI    |  |                         |             | CES IN   | RENEE       | CIA    | LOW          | NFRSHIP OF                                | Expires:                             | 2005                   |  |
| subject to                          | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP<br>SECURITIES |                         |             |  |             |        |              | Estimated average                         |                                      |                        |  |
|                                     | Section 16. SECURITIES<br>Form 4 or                        |                         |             |  |             |        |              | burden hours per<br>response 0.5          |                                      |                        |  |
| Form 5                              | Filed purs   | suant to S              | Section 16  | 6(a) of th   | e Securit   | ies Ez | xchang       | ge Act of 1934,                           | reepenee                             | 0.0                    |  |
| obligatior<br>may conti             |  | a) of the l             | Public Uti  | ility Hold   | ling Con    | ipany  | Act o        | of 1935 or Section                        | n                                    |                        |  |
| See Instru                          |  | 30(h)                   | of the Inv  | vestment   | Compan      | y Act  | of 19        | 40  |                                      |                        |  |
| 1(b).                               |  |                         |             |  |             |        |              |   |                                      |                        |  |
| (Print or Type R                    | Responses)   |                         |             |  |             |        |              |   |                                      |                        |  |
|                                     | ddress of Reporting I                                      | Person <u>*</u>         | 2. Issuer   | Name and   | l Ticker or | Tradin | g            | 5. Relationship of                        | f Reporting Per                      | son(s) to              |  |
| CIPOLLONE JOSEPH B Symbol<br>AMERIC |  |                         |             | <sup>abol</sup><br>IERICAN GREETINGS CORP          |             |        |              | Issuer                                    |                                      |                        |  |
|                                     |  |                         |             |  |             |        |              | (Check all applicable)                    |                                      |                        |  |
|                                     |  |                         | [AM]        |  |             |        |              | (Chev                                     | ek un appliedor                      |                        |  |
| (Last)                              | (First) (M   | /liddle)                | 3. Date of  | Earliest Tr  | ansaction   |        |              | Director                                  |                                      | 6 Owner                |  |
|                                     |  |                         | (Month/Da   | -  |             |        |              | X Officer (give below)                    | e title Oth<br>below)                | er (specify            |  |
| ONE AMER                            | RICAN ROAD   |                         | 02/29/20    | )12  |             |        |              | VP & Chi                                  | ef Accounting                        | Officer                |  |
| (Street) 4. If Amen                 |  |                         |             | mendment, Date Original                            |             |        |              | 6. Individual or Joint/Group Filing(Check |                                      |                        |  |
|                                     |  |                         | Filed(Mont  | th/Day/Year  | .)          |        |              | Applicable Line)                          |                                      |                        |  |
|                                     |  |                         |             |  |             |        |              | _X_ Form filed by<br>Form filed by N      | One Reporting Po<br>More than One Ro |                        |  |
| CLEVELAN                            | ND, OH 44144   |                         |             |  |             |        |              | Person                                    |                                      | eportung               |  |
| (City)                              | (State)  | (Zip)                   | Table       | e I - Non-E  | Derivative  | Securi | ties Ac      | quired, Disposed o                        | f, or Beneficia                      | lly Owned              |  |
| 1.Title of                          | 2. Transaction Date  |                         |             | 3.   | 4. Secur    |        |              | 5. Amount of                              | 6. Ownership                         |                        |  |
| Security<br>(Instr. 3)              | (Month/Day/Year)   |                         | on Date, if | TransactionAcquired (A) or<br>Code Disposed of (D) |             |        |              | Securities<br>Beneficially                | Form: Direct (D) or                  | Indirect<br>Beneficial |  |
| (IIIsu: 5)                          |  | any<br>(Month/Day/Year) |             | CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)   |             |        |              | •   | Indirect (I)                         | Ownership              |  |
|                                     |  |                         | •           |  |             |        |              | Following                                 | (Instr. 4)                           | (Instr. 4)             |  |
|                                     |  |                         |             |  |             | (A)    |              | Reported<br>Transaction(s)                |                                      |                        |  |
|                                     |  |                         |             |  |             | or     | р.           | (Instr. 3 and 4)                          |                                      |                        |  |
| Class A                             |  |                         |             | Code V   | Amount      | (D)    | Price        |   |                                      |                        |  |
| Class A<br>Common                   | 02/29/2012   |                         |             | F  | 4,707       | D      | \$ 15        | 21,185                                    | D                                    |                        |  |
| Shares                              | 52,27,2012   |                         |             | -  | (1)         | 2      | φ 1 <i>5</i> | _1,100                                    | -                                    |                        |  |

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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
|   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                          | Relationships |            |                                     |       |  |  |  |  |
|--|---------------|------------|-------------------------------------|-------|--|--|--|--|
|  | Director      | 10% Owner  | Officer                             | Other |  |  |  |  |
| CIPOLLONE JOSEPH B<br>ONE AMERICAN ROAD<br>CLEVELAND, OH 44144 |               |            | VP & Chief<br>Accounting<br>Officer |       |  |  |  |  |
| Signatures   |               |            |                                     |       |  |  |  |  |
| Catherine M. Kilbane, Power of A Cipollone                     | oseph B.      | 03/02/2012 |                                     |       |  |  |  |  |
| <u>**</u> Signature of Repor                                   | ting 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) Represents the number of shares withheld for the payment of taxes due upon vesting of performance shares.

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.