Edgar Filing: JOHNSEN NIELS M - Form 4

JOHNSEN N Form 4	NIELS M										
March 13, 20	013										
FORM	14								OMB AF	PPROVAL	
	UNITE	O STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check the if no long	is box								Expires:	January 31, 2005	
subject to Section 1 Form 4 o Form 5	6. r		GES IN BENEFICIAL OWN SECURITIES					Estimated a burden hou response	iverage		
obligation may cont <i>See</i> Instru 1(b).	ns inue. Section 1'	7(a) of the	Public U		ling Com	ipany	Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type F	Responses)										
1. Name and A JOHNSEN	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL SHIPHOLDING CORP [ISH]					5. Relationship of Reporting Person(s) to Issuer					
						(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of Earliest TransactionX_ Director					X Director X Officer (give	X 10% Owner ve title Other (specify		
				(Month/Day/Year) 03/11/2013				below) below) Chairman and CEO			
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
COLTS NE	CK, NJ 07722							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficial	ly Owned	
(Instr. 3) any			n Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)			of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	03/11/2013			А	10,150	А	<u>(1)</u>	249,933	D		
Common Stock	03/11/2013			F <u>(2)</u>	3,752	D	\$ 20.07	246,181	D		
Common Stock								867,107	I	See Footnote (3)	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form

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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 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. Transactio Code (Instr. 8)	5. ofNumber 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)		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				
JOHNSEN NIELS M 133 MUHLENBRINK ROAD COLTS NECK, NJ 07722	Х	Х	Chairman and CEO					
Signatures								
/s/ Neils M. Johnsen 03	/13/2013							

<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).
- (1) Represents the amount of absolute performance and relative performance based restricted stock units vested upon the Company filing its 2012 Annual Report on Form 10K.
- (2) Represents a disposition of shares to ISH in payment of withholding taxes.

Shares held by a Family Trust include (i) 642,485 shares held directly and (ii) 224,622 shares held indirectly through the Trust's
(3) controlling interest in the Caltar Corporation, of which Niels M. Johnsen is a shareholder, Vice President and a Director. Mr. Johnsen disclaims beneficial ownership of the shares held by the Family Trust, except to the extent of his pecuniary interest therein.

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.