Edgar Filing: COTT CORP /CN/ - Form 4

COTT CORP /C	N/												
Form 4													
October 09, 2014	1												
FORM 4						NO		D HOGLON	OMB AP	PROVAL			
. •	UNITE.	DSTAT	ES SECURITIE Washing			NGI	E CON	AMISSION	OMB Number:	3235-0287			
	Check this box						Expires:	January 31,					
if no longer subject to							RSHIP OF	200					
Section 16.		SECURITIES						Estimated average burden hours per					
Form 4 or								response 0.5					
Form 5	Filed p	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,											
obligations may continue.	Section 1	7(a) of the	ne Public Utility	Holding (Compan	y Act	t of 19	35 or Section					
See Instruction		30((h) of the Investn	nent Com	pany Ac	t of 1	1940						
1(b).													
(Print or Type Respo	nses)												
(Thin of Type Respe	JIISCS)												
1. Name and Address of Reporting Person <u>*</u> Monahan Gregory R			2. Issuer Name	2. Issuer Name and Ticker or Trading Symbol				. Relationship of Reporting Person(s) to					
			Symbol					uer					
			•	COTT CORP /CN/ [COT]					(Check all and inches)				
(Last)	(First)	(Middle)	3 Date of Earlie	3. Date of Earliest Transaction (Check					all applicable)				
	(Month/Day/Year)X_ Director				K Director	10% Owner							
C/O CRESCEN	DO		06/18/2014					Officer (give ti		(specify			
PARTNERS, 82	5 THIRD	AVENU	E,				belo	ow)	below)				
40TH FLOOR													
	(Street)		4. If Amendmer	nt, Date Ori	ginal		6. I	ndividual or Join	nt/Group Filing	g(Check			
			Filed(Month/Day	/Year)				plicable Line)					
								Form filed by Or Form filed by Mo					
NEW YORK, N	Y 10022						Per	•	ie ulan Olie Kep	orung			
(City)	(State)	(Zip)	Table I - N	on-Deriva	tive Secur	ities A	Acquire	d, Disposed of,	or Beneficially	y Owned			
1.Title of Security	2. Transac	tion Date	2A. Deemed	3.	4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of			
(Instr. 3)	(Month/D	ay/Year)	Execution Date, if	Transactio	on(A) or D	ispose	d of	Securities	Ownership	Indirect			
			any (Month/Day/Year)	Code	(D) (Instr. 2	1 and	5)	Beneficially Owned	Form: Direct (D)	Beneficial Ownership			
			(Wonul/Day/Tear)	(111501.0)	(11150.5,	4 anu	5)	Following	or Indirect	(Instr. 4)			
						(\mathbf{A})		Reported	(I)				
						(A) or		Transaction(s)	(Instr. 4)				
				Code V	Amount		Price	(Instr. 3 and 4)					
Common Shares	06/18/20)14		Р	468 (1)	А	\$ 7.14	65,474	D				
Common Shares	, 00/10/20	/11		1	100	11	7.14	00,174	D				
C C	00/10/20	114		D	420 (1)		\$	(5.012	D				
CommonShares	09/12/20)14		Р	439 <u>(1)</u>	А	\$ 7.45	65,913	D				

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

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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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh				
	Director	10% Owner	Officer	Other		
Monahan Gregory R C/O CRESCENDO PARTNERS 825 THIRD AVENUE, 40TH FLOOR NEW YORK, NY 10022	Х					
Signatures						
/s/ Marni Morgan Poe, Attorney-in-Fact	10/0)9/2014				
**Signature of Reporting Person	1	Date				
Explanation of Pooponooo						

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) Shares were acquired as part of a broker-administered dividend reinvestment 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.