GP STRATEGIES CORP

Form 4 January 05, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

OMB APPROVAL

3235-0287 Number: January 31, Expires:

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Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction

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

1(b).

Common

Stock

12/31/2015

(Print or Type Responses)

| 1. Name and Address of Reporting Person * STRAIT A MARVIN | | | 2. Issuer Symbol | Name and | Ticker or Trading | 5. Relationship of Reporting Person(s) to Issuer | | | | |
|---|--------------------|------------|---------------------|----------------------------|------------------------|--|--|--------------|--|--|
| | | | GP STR | P STRATEGIES CORP [GPX] | | | (Check all applicable) | | | |
| (Last) | (First) | Middle) | 3. Date of | Earliest Tra | nnsaction | | | | | |
| | | | (Month/Da | ay/Year) | | _X_ Director | 109 | % Owner | | |
| 2 NORTH CASCADE AVENUE, SUITE 1300 (Street) | | | 12/31/20 | 015 | | Officer (below) | ive title Other (specify below) | | | |
| | | | 4. If Amer | ndment, Dat | e Original | 6. Individual or Joint/Group Filing(Check | | | | |
| COLORAI | OO SPRINGS, CO |) 80903 | Filed(Mon | th/Day/Year) | | | e) by One Reporting P by More than One R | | | |
| (City) | (State) | (Zip) | Table | e I - Non-Do | erivative Securities A | | d of, or Beneficia | lly Owned | | |
| 1.Title of | 2. Transaction Dat | te 2A. Dee | med | 3. | 4. Securities | 5. Amount of | 6. Ownership | 7. Nature of | | |
| Security | | | on Date, if | TransactionAcquired (A) or | | Securities | Form: Direct | Indirect | | |
| (Instr. 3) | | any | | Code | Disposed of (D) | Beneficially | (D) or | Beneficial | | |
| | | (Month/ | Day/Year) | (Instr. 8) | (Instr. 3, 4 and 5) | Owned | Indirect (I) | Ownership | | |
| | | | | | | Following | (Instr. 4) | (Instr. 4) | | |
| | | | | | Z & S | Reported | | | | |

(A)

or

(D)

Price

(1)

Amount

500

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

A

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Transaction(s)

(Instr. 3 and 4)

D

27,433

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 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, | | ate | 7. Titl Amou Under Securi (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|--|-------------|------------|---|------------------------|--|---|
| | | | | | 4, and 5) | Date | Expiration | | Amount | | |
| | | | | Code V | (A) (D) | Exercisable | Date | Title | Number of Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

STRAIT A MARVIN
2 NORTH CASCADE AVENUE, SUITE 1300 X
COLORADO SPRINGS, CO 80903

Signatures

Kenneth L. Crawford for A. Marvin Strait 01/05/2016

**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) Represents a portion of the quarterly Director fees for the quarter ended December 31, 2015 paid in shares of the Registrant's Common Stock.

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.

Reporting Owners 2