MIDDLETON PAUL B

Form 4 May 07, 2009

FORM 4

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

OMB APPROVAL OMB

Expires:

Check this box if no longer

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 Number: January 31,

subject to Section 16. Form 4 or Form 5

SECURITIES

2005 Estimated average burden hours per response... 0.5

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).

(Print or Type Responses)

1. Name and Address of Reporting Person * MIDDLETON PAUL B

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

(First) (Middle) (Last)

ROGERS CORP [ROG]

(Check all applicable)

C/O ROGERS CORP. ONE

3. Date of Earliest Transaction

(Month/Day/Year) 05/07/2009

Director 10% Owner X_ Officer (give title Other (specify

below) Corporate Treasurer

TECHNOLOGY DRIVE PO BOX 188

> (Street) 4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

ROGERS, CT 06263-0188

Security

(Instr. 3)

(State) (Zip) (City) 1. Title of 2. Transaction Date 2A. Deemed

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities

(Month/Day/Year) Execution Date, if TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8)

5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Indirect Beneficial Owned (I) Ownership (Instr. 4) Following (Instr. 4)

Reported (A) Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

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 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 Conversion 3. Transaction Date 3A. Deemed

5. Number of (Month/Day/Year) Execution Date, if TransactiorDerivative

6. Date Exercisable and **Expiration Date**

7. Title and Amount Underlying Securiti

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (D) Date Exercisable	Expiration Date	Title	Amor Or Nur of S
Employee Stock Option (Right to Buy)	\$ 23.86	05/07/2009(1)		A	13,400	02/11/2011 <u>(2)</u>	02/11/2019	Capital (Common) Stock	13,

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MIDDLETON PAUL B C/O ROGERS CORP ONE TECHNOLOGY DRIVE PO BOX 188 ROGERS, CT 06263-0188

Corporate Treasurer

Signatures

Alice. R. Tetreault as Power of Attorney 05/07/2009

**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).
- This stock option grant was approved by the Compensation and Organization Committee of the Board of Directors on February 11, 2009,
- (1) but subject to shareholder approval of the Rogers Corporation 2009 Long-Term Equity Compensation Plan and such approval was obtained on May 7, 2009.
- (2) This Non-Qualified Stock Option is granted pursuant to the 2009 Long-Term Equity Compensation Plan and is exercisable in one-third increments on the second, third and fourth anniversary dates of the grant (2/11/09).
- (3) Mr. Middleton also indirectly owns 633.7548 shares of Rogers Corporation Capital (Common) Stock through the Company's 401(k) 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.

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