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WABCO F Form 4	Ioldings Inc.												
March 20,										01			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OMB	1B APPROVAL 3235-0287				
Check this box				ashing	gtoi	n, D.C. 2	0549			Numb Expire	er: January 31,		
Section 16.			NGES IN BENEFICIAL OW SECURITIES					NERSHIP O	F Estima burder	ated average hours per			
Form 4 or Form 5 obligations may continue.response0.5See Instruction 1(b).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 19400.5													
(Print or Type Responses)													
DALOIA G PETER Symbol				uer Name and Ticker or Trading l CO Holdings Inc. [WBC]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)					Transaction		-,	(Cl	neck all appl	icable)		
(Month C/O TRANE INC., ONE 03/18/ CENTENNIAL AVENUE			n/Day/Year) /2008					X_ Director 10% Owner Officer (give title Other (specify below) below)					
				mendment, Date Original Aonth/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 				
(City)	(State)	(Zip)	Ta	ble I - N	Non	-Derivativ	e Sect	irities Ac	quired, Disposed	l of, or Bene	ficially Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)									5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
Common Stock	03/18/2008			A <u>(1)</u>		35.162		\$ 42.66	322.536	Ι	Deferred Compensation Plan		
Common Stock	03/19/2008			A <u>(1)</u>		35.141	A	\$ 42.68	357.677	Ι	Deferred Compensation Plan		
Common Stock									1,021.855 (2)	Ι	By Trust (3)		
Common Stock									11,642	D			
									4,080.105	Ι			

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Common
Stock

ESOP/Savings Plan (4)

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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	/ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
DALOIA G PETER C/O TRANE INC. ONE CENTENNIAL AVENUE PISCATAWAY, NJ 08855	Х							
Signatures								
/s/ Thomas P. Conaghan, Attorney-in-Fact		03/2	0/2008					

**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 meeting fees paid to non-management directors, receipt of which Director elected to defer pursuant to the WABCO Holdings Inc. Deferred Compensation Plan, and which shares are allocated to Mr. D'Aloia's Stock Account under the Plan.

(2) Includes the reinvestment of cash dividends paid on shares held in the Rabbi trust for non-management directors.

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- (3) Shares held in a Rabbi trust for non-management directors. Director exercises voting rights but no right to dispose until directorship ends.
- (4) Shares held in Trane Inc.'s ESOP and Savings 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.