

[ ] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				* 2	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ACKER MA	RIAN			]	BAI	RNES (	GRO	IJ	PINC	[]	B ]						
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)							Director			10% C	wner	
(Zast) (That) (Made)													er (give titl	e below)	Oth	er (specify	
BARNES GROUP INC., 123 MAIN				IN								vP, Cont	roller				
STREET		,											, ,				
	(Street)				4. If Amendment, Date Original Filed (MM/DD/YYYY)					6. Individual or Joint/Group Filing (Check Applicable Line)							
BRISTOL, C	T 06010	)											W E C		D : D		
(City) (State) (Zip)												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
														_			
		Tal	ole I - Noi						<u> </u>			<u> </u>	Beneficially	<u></u>			
1.Title of Security (Instr. 3)				2. Tr Date		s. 2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Secur Acquired				ing Reported Transaction(s)			Ownership Form:	7. Nature of Indirect Beneficial Ownership
					Disposed (Instr. 3,				lof	(D)	(Instr. 3						
				any				(A)							or Indirect		
							Code	v	Amount	or (D)						(I) (Instr. 4)	
Common Stock 8			8/12/	/2015		F	_	399	D D	\$40.48		42852.1458 (1)			D		
											<u> </u>						By
Common Stock								3.351			I	Company's Employee Stock Purchase Plan					
Common Stock													3.66			I	By Company's 401(k) Plan
				'		•	,				•	_					
	1	rivat						_		_			ts, options			1 ·	1
Title of Derivate     Security	2. Conversion	3. Trans	1	4. Trans.		umber of	6. Date Exercisable and Expiration Date			7. Title and Amou Securities Underly			8. Price of 9. Number Derivative of		10. Ownership	11. Nature	
(Instr. 3)	or Exercise Price of Derivative Security  Date Execution Date, if any  Execution Code (Instr.			Code	Secu	Deriva (Instr.				Derivati	tive Security		Security	rity derivative	Form of 1	Beneficial	
				(Instr. 8)	8) Acquired (A) of Disposed of (I					(Instr. 3 and 4)			` ′	Securities Beneficially		Ownership (Instr. 4)	
					(Inst	tr. 3, 4 and									Owned Following Reported	Direct (D) or Indirect (I) (Instr.	
				Code V	Ĺ	) (D)	Date Exercisable D		Expira Date	tion	Title Amount or Shares		Number of	Transaction (s) (Instr. 4)		4)	

## **Explanation of Responses:**

(1) Includes balances of 566 Restricted Stock Units granted 2/12/2013, 666 granted 2/12/2014, 533 granted 2/12/2014 and 1000 granted 2/11/2015, and 2900 Performance Share Awards granted 2/12/2013, 1700 granted 2/12/2014, 1300 granted 2/12/2014 and 1700 granted 2/11/2015, that are subject to forfeiture if certain events occur.

**Reporting Owners** 

Paparting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
ACKER MARIAN BARNES GROUP INC. 123 MAIN STREET			VP, Controller				

BRISTOL, CT 06010				
Signatures				
Monique B. Marchetti, pursua	8/13	/2015		

\*\* Signature of Reporting Person

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

- \* 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).

Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.