SOFFER ROBERT M

Form 4 May 31, 2011

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

if no longer subject to Section 16. Form 4 or

Check this box

January 31, Expires: 2005

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

Estimated average burden hours per response... 0.5

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).

(Print or Type Responses)

| • • | • | | | | | | |
|---|--------------|----------|--|--|--|--|--|
| 1. Name and Address of Reporting Person * SOFFER ROBERT M | | | 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | ROGERS CORP [ROG] | (Check all applicable) | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | (Check an approacte) | | | |
| | | | (Month/Day/Year) | Director 10% Owner | | | |
| C/O ROGER | RS | | 05/27/2011 | _X_ Officer (give title Other (specify | | | |
| CORPORAT | ΓΙΟΝ, ONE | | | below) below) VP & Corporate Secretary | | | |
| TECHNOLO | OGY DRIVE I | PO BOX | | vi & corporate secretary | | | |
| 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 | | | |
| DOCEDS C | T 06262 0199 |) | | Form filed by More than One Reporting | | | |

ROGERS, CT 06263-0188

| (City) | (State) (Zi | p) Table 1 | I - Non-Dei | rivative So | ecuriti | ies Acqu | iired, Disposed of | , or Beneficiall | y Owned |
|--------------------------------------|--------------------------------------|---|--|-------------------|--------------|---------------|--|--|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactio Code (Instr. 8) | (D) (Instr. 3, | 4 and (A) or | d of 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Capital (Common) Stock | 05/27/2011 | | Code V S | Amount 100 | ` ´ | Price \$ 46.7 | 42,421 | D | |
| Capital (Common) Stock | | | | | | | 3,389.8716 | I | By 401(k) Plan |

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

Person

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displays a currently valid OMB control number.

Relationships

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | 2. | 3. Transaction Date | | 4. T | 5. | 6. Date Exerc | | 7. Titl | | 8. Price of | 9. Nu |
|------------|-------------|---------------------|------------------|------------|------------|---------------|------------|---------|------------|-------------|---------|
| | Conversion | (Month/Day/Year) | | Transactio | | Expiration Da | | Amou | | Derivative | Deriv |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | rlyıng | Security | Secui |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | • | | Secur | ities | (Instr. 5) | Bene |
| | Derivative | | | | Securities | | | (Instr. | . 3 and 4) | | Owne |
| | Security | | | | Acquired | | | | | | Follo |
| | | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | (IIIsti |
| | | | | | | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | Amount | | |
| | | | | | | D. | E | | or | | |
| | | | | | | Date | Expiration | Title | Number | | |
| | | | | | | Exercisable | Date | | of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | | • | |
|--------------------------------|----------|-----------|---------|-------|
| | Director | 10% Owner | Officer | Other |

SOFFER ROBERT M
C/O ROGERS CORPORATION
ONE TECHNOLOGY DRIVE PO BOX 188
ROGERS, CT 06263-0188

VP &
Corporate
Secretary

Signatures

Alice R. Tetreault as Power of Attorney 05/31/2011

**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).

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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