Edgar Filing: ROGERS CORP - Form 4

| Form 4 May 12, 2008 | | | | | | | | | | | |
|--|--|--|---|---|--------------------------|--|--|--|---|--|--|
| FORM 4 | | | | | | | | | PPROVAL | | |
| Washington, D.C. 20549 | | | | | | | | | 3235-0287 | | |
| if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction See In | | | | | | | Estimated burden hou response | | | |
| (Print or Type Respon | nses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> BAKER LEONARD M | | | 2. Issuer Name and Ticker or Trading Symbol ROGERS CORP [ROG] | | | Trading | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (Last) (First) (Middle) 60 LYONS PLAINS ROAD | | | 3. Date of Earliest Transaction(Month/Day/Year)05/09/2008 | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | | | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/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 | | | | | |
| WESTPORT, CT | 1 06880 | | | | | | Person | | 1 0 | | |
| (City) (| (State) | (Zip) | Tab | ole I - Non-I | Derivative | Securities A | Acquired, Disposed | of, or Beneficia | lly Owned | | |
| | ansaction Date th/Day/Year) | 2A. Deemo Execution any (Month/Da | Date, if | 3. Transaction Code (Instr. 8) Code V | Disposed (Instr. 3, 4 | (A) or of (D) | 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) | | |
| Reminder: Report on | a separate line | for each cla | ass of sec | urities benef | icially owr | ed directly | or indirectly. | | | | |
| | | | | | inform requir | ation cont ed to resp ys a curre | spond to the colle tained in this forn ond unless the fo ntly valid OMB co | n are not rm | SEC 1474 (9-02) | | |

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

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. Number | 6. Date Exercisable and | 7. Title and Amount of |
|-------------|-------------|---------------------|--------------------|------------|-----------------|-------------------------|------------------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | onof Derivative | Expiration Date | Underlying Securities |
| Security | or Exercise | | any | Code | Securities | (Month/Day/Year) | (Instr. 3 and 4) |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Acquired | | |

| | Derivative Security | | | | (A) orDisposed(D)(Instr. 3, and 5) | | | | | |
|--------------------------------------|------------------------|------------|--------------|---|---|-----|---------------------|--------------------|------------------------------|--|
| | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Option (Right to Buy) | \$ 34.6 | 05/09/2008 | A <u>(1)</u> | | 1,608 | | 05/09/2008 | 05/09/2018 | Capital (Common) Stock | 1,608 |
| Donos | ting Ou | | | | | | | | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | |
|---|----------|------------|---------|-------|
| | Director | 10% Owner | Officer | Other |
| BAKER LEONARD M 60 LYONS PLAINS ROAD WESTPORT, CT 06880 | Х | | | |
| Signatures | | | | |
| Alice R. Tetreault as Power of Attorney | | 05/12/2 | | |
| **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) Granted pursuant to the Rogers Corporation 2005 Equity Compensition 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.