### Edgar Filing: MOSAIC CO - Form 4

| MOSAIC CO   | )  |   |  |                                 |   |   |            |  |  |   |  |  |
|---|--|---|--|---------------------------------|---|---|------------|--|--|---|--|--|
| Form 4  | -  |   |  |                                 |   |   |            |  |  |   |  |  |
| August 06, 20   |  |   |  |                                 |   |   |            |  |  |   |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549 |  |   |  |                                 |   |   | COMMISSION |  | PPROVAL<br>3235-0287   |   |  |  |
| Check this<br>if no longe<br>subject to<br>Section 16<br>Form 4 or          | er <b>STAT</b><br>5.   | F CHAN  | CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES |                                 |   |   |            | Expires: January 31,<br>2005<br>Estimated average<br>burden hours per  |  |   |  |  |
| Form 5<br>obligation<br>may contin<br><i>See</i> Instruct<br>1(b).          | Filed<br><sup>s</sup> Section  | 17(a) of the                                      |  | ility Hold                      | ling Com  | pany  | Act o      | ge Act of 1934,<br>of 1935 or Sectio<br>40   | response   | . 0.5   |  |  |
| (Print or Type R  | esponses)  |   |  |                                 |   |   |            |  |  |   |  |  |
| 1. Name and Ac<br>SEIBERT ST  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>MOSAIC CO [MOS] |   |  |                                 | g   | 5. Relationship of Reporting Person(s) to<br>Issuer |            |  |  |   |  |  |
| (Last)  | (First)  | (Middle)  | 3. Date of                                       | 3. Date of Earliest Transaction |   |   | (Cheo      | ck all applicabl   | e)   |   |  |  |
| 2964 WELLINGTON<br>CIRCLE, SUITE 1  |  |   | (Month/Day/Year)<br>08/02/2007                   |                                 |   |   |            | X Director<br>Officer (give<br>below)  | Officer (give title Other (specify                                   |   |  |  |
|   | (Street)   | (Street) 4. If Amendment, I<br>Filed(Month/Day/Ye |  |                                 |   | y/Year) Applicable Line)<br>_X_ Form filed by       |            |  |  | oint/Group Filing(Check<br>One Reporting Person                   |  |  |
| TALLAHAS  | SEE, FL 323  | 309   |  |                                 |   |   |            | Form filed by M<br>Person  | More than One R  | eporting  |  |  |
| (City)  | (State)  | (Zip)   | Table  | e I - Non-D                     | erivative S                                       | Securi  | ties Ac    | quired, Disposed o   | f, or Beneficia  | lly Owned   |  |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction<br>(Month/Day/Y   | ear) Executi<br>any                               | emed<br>on Date, if<br>/Day/Year)                | Code<br>(Instr. 8)              | 4. Securi<br>onAcquired<br>Disposed<br>(Instr. 3, | l (A) o<br>l of (D<br>4 and<br>(A)<br>or            | ))<br>5)   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Common<br>Stock   |  |   |  | Code V                          | Amount  | (D)   | Price      | 0  | D  |   |  |  |

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)

#### Edgar Filing: MOSAIC CO - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4. 5. Number<br>Transaction Derivative<br>Code Securities<br>(Instr. 8) Acquired<br>(A) or<br>Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) |         | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |  |
|---|---|---|---|---|---------|--|--------------------|---|--|
|   |   |   |   | Code V  | (A) (D) | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |
| Restricted<br>Stock<br>Units                        | \$ 0 <u>(1)</u>   |   |   |   |         | 11/30/2007   | (2)                | Common<br>Stock   | 3,452                                  |
| Restricted<br>Stock<br>Units                        | \$ 0 <u>(1)</u>   |   |   |   |         | 08/01/2008   | (2)                | Common<br>Stock   | 3,470                                  |
| Restricted<br>Stock<br>Units                        | \$ 0 <u>(1)</u>   |   |   |   |         | 08/04/2009   | (2)                | Common<br>Stock   | 4,207                                  |
| Restricted<br>Stock<br>Units                        | \$ 0 <u>(1)</u>   | 08/02/2007                              |   | А   | 1,624   | 08/02/2010   | (2)                | Common<br>Stock   | 1,624                                  |

## **Reporting Owners**

RelationshipReporting Owner Name / AddressDirector10% OwnerOfficerOtherDirector10% OwnerOfficerOtherImage: Selbert Steven MSelbert Steven S

\*\*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) One for one

(2) Not applicable

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

8. I De Sec (In

### Edgar Filing: MOSAIC CO - Form 4

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.