

LINDSAY MANUFACTURING CO  
 Form 3  
 April 12, 2006

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Â Haidar Samir Abou

(Last) (First) (Middle)

39 ALLEE DE LA FERME  
 D'ARMENON

(Street)

GIF-SUR-YVETTE,Â I0Â 91190

(City) (State) (Zip)

2. Date of Event Requiring Statement (Month/Day/Year)

04/03/2006

3. Issuer Name and Ticker or Trading Symbol  
 LINDSAY MANUFACTURING CO [LNN]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director  10% Owner  
 Officer  Other  
 (give title below) (specify below)  
 Vice President International

5. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No Securities are Beneficially Owned	0	D	Â

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
--------------------------------------------	----------------------------------------------------------	-----------------------------------------------------------------------------	--------------------------------------------------------	------------------------------------------------------	-------------------------------------------------------

Edgar Filing: LINDSAY MANUFACTURING CO - Form 3

	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)
Cash Restricted Stock Unit	Â (2)	Â (2)	Common Stock	1,000	\$ (1)	D Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Haidar Samir Abou 39 ALLEE DE LA FERME D'ARMENON GIF-SUR-YVETTE, Î 10 Î 91190	Â	Â	Â Vice President International	Â

## Signatures

David B. Downing, Vice President  
and CFO

04/12/2006

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) Each cash restricted stock unit represents a contingent right to receive a cash payment equal to the fair market value of one share of LNN common stock on the applicable vesting date.
  - (2) The cash restricted stock units vest in three equal annual installments beginning on Novmeber 1, 2006. Cash payments will be distributed to the reporting person as soon as practicable following the relevant vesting date.

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.