

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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. Name and Address of Reporting Person * CEMEX SAB DE CV (Last) (First) (Middle) AVENIDA RICARDO MARGAIN ZOZAYA 325,, COLONIA VALLE DEL CAMPESTRE (Street) SAN PEDRO GARZA GARCIA N. O5 66265 LEON (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol HUTTIG BUILDING PRODUCTS INC [HBPLPK]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) <input type="checkbox"/> Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 12/17/2012	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, par value \$0.01 per share ⁽¹⁾	12/17/2012		S		5,755,940	D	\$ 1.1	0	I	See Footnote ⁽²⁾

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person *

[CEMEX SAB DE CV](#)

(Last) (First) (Middle)

[AVENIDA RICARDO MARGAIN ZOZAYA 325,, COLONIA VALLE DEL CAMPESTRE](#)

(Street)

[SAN PEDRO GARZA GARCIA N. 05 66265 LEON](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person *

[RUGBY GROUP LTD](#)

(Last) (First) (Middle)

[CEMEX HOUSE, COLDHARBOUR LANE, THORPE, EGHAM](#)

(Street)

[SURREY X0 TW20 8TD](#)

(City) (State) (Zip)

Explanation of Responses:

1. This form is a joint filing by CEMEX S.A.B. de C.V. ("CEMEX") and The Rugby Group Limited ("Rugby"), each of whom is filing in its capacity as a 10% owner.
2. The Shares were held by Rugby. As Rugby is an indirect wholly-owned subsidiary of CEMEX, CEMEX may be deemed to beneficially own the Shares.

[/s/ Guillermo F. Hernandez Morales, Attorney, CEMEX 12/18/2012 S.A.B. de C.V.](#)

[/s/ Michael F. Egan, Vice President, The Rugby Group Limited 12/18/2012](#)

** Signature of Reporting Person Date

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).

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 Number.