#### Edgar Filing: Lucareli Michael B - Form 4

| Lucareli Mich<br>Form 4   | nael B                                  |      |   |  |  |                |         |   |  |           |  |
|---|---|------|---|--|--|----------------|---------|---|--|-----------|--|
| June 04, 2018   | 3                                       |      |   |  |  |                |         |   |  |           |  |
|   |   |      |   |  |  |                |         |   | OMB A  | PPROVAL   |  |
|   |   |      |   |  | ITIES AND EXCHANGE COMMISSION<br>hington, D.C. 20549 |                |         |   |  | 3235-0287 |  |
| Check this<br>if no longe<br>subject to<br>Section 16<br>Form 4 or<br>Form 5<br>obligation<br>may contin<br>See Instruct<br>1(b). | Filed purs<br>Section 17(a              |      |   |  |  |                |         |   | January 31<br>Expires: 2005<br>Estimated average<br>burden hours per<br>response 0.5 |           |  |
| (Print or Type R  | esponses)                               |      |   |  |  |                |         |   |  |           |  |
| Lucareli Michael B Symbo<br>MOD   |   |      | ymbol   | DINE MANUFACTURING CO                            |  |                |         | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)   |  |           |  |
| (Last) (First) (Middle) 3. Dat<br>(Mont   |   |      | . Date of Earliest Transaction<br>Month/Day/Year)<br>05/31/2018 |  |  |                |         | Director 10% Owner<br>XOfficer (give title Other (specify<br>below) below)<br>VP, Finance & CFO   |  |           |  |
|   |   |      | If Amendment, Date Original<br>led(Month/Day/Year)              |  |  |                |         | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul> |  |           |  |
| RACINE, W   | 1 53403                                 |      |   |  |  |                |         | Form filed by N<br>Person   | Aore than One Re   | eporting  |  |
| (City)  | (State) (2                              | Zip) | Table   | I - Non-De                                       | erivative S  | ecuri          | ties Ac | quired, Disposed of   | f, or Beneficial   | lly Owned |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction Date<br>(Month/Day/Year) |      | Date, if  | 3.<br>Transactic<br>Code<br>(Instr. 8)<br>Code V | Disposed<br>(Instr. 3,                               | (A) o<br>of (D | )       | Securities<br>Beneficially<br>Owned   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)                 |           |  |
| Common<br>stock   | 05/31/2018                              |      |   | F  | 2,779<br>(1)   | D              |         | 135,754 <u>(2)</u>  | 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)

### Reporting Owners

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| 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) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | int of<br>lying                        | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--|---|---------------------|--------------------|--|--|---|--|
|   |   |   | Code V                                 |   | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |

# **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                       | Relationships |           |                   |       |  |  |  |  |
|---|---------------|-----------|-------------------|-------|--|--|--|--|
|   | Director      | 10% Owner | Officer           | Other |  |  |  |  |
| Lucareli Michael B<br>1500 DEKOVEN AVE.<br>RACINE, WI 53403 |               |           | VP, Finance & CFO |       |  |  |  |  |
| Signatures  |               |           |                   |       |  |  |  |  |
| Sylvia A. Stein, Attorney in Fact                           | 00            | 5/04/2018 |                   |       |  |  |  |  |
| **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) Shares disposed of in a private transaction to cover tax withholding.
- (2) This total includes 971 units of Modine common stock held in the Reporting Person's Modine 401(k) Retirement Plan account.

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.