#### **GROMEK JOSEPH R**

Form 4 October 03, 2018

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** Number:

3235-0287

Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Expires:

January 31, 2005

0.5

subject to Section 16. Form 4 or Form 5

**SECURITIES** 

Estimated average burden hours per response...

**OMB APPROVAL** 

obligations may continue. See Instruction

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(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

**GROMEK JOSEPH R** 

Symbol **WOLVERINE WORLD WIDE INC** 

(Check all applicable)

/DE/ [WWW]

(Last) (First) (Middle)

3. Date of Earliest Transaction

X\_ Director 10% Owner

(Month/Day/Year)

10/01/2018

Officer (give title Other (specify below)

C/O 9341 COURTLAND DRIVE

(Street)

NE

4. If Amendment, Date Original

(Instr. 8)

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year) Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(Instr. 4)

ROCKFORD, MI 49351

(State) (Zip) (City)

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

1. Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership

Reported (A) Transaction(s)

or

(Instr. 3 and 4)

Code V Amount (D) Price

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.

SEC 1474 (9-02)

(Instr. 4)

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

1. Title of Derivative Conversion 3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if Transaction of Derivative Expiration Date

5. Number

6. Date Exercisable and

7. Title and Amount of 8. Pric Underlying Securities Deriva

1

## Edgar Filing: GROMEK JOSEPH R - Form 4

Code

Securities

(Month/Day/Year)

(Instr. 3 and 4)

Securi

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	(A) Acq (A) Disp (D) (Ins	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Mondin Day) Tear)		(msu. 3 and	*)	(Instr.
				Code			(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Units	<u>(1)</u>	10/01/2018		A	614	4.7		<u>(1)</u>	<u>(1)</u>	Common Stock	614.7	\$ 38.

## **Reporting Owners**

or Exercise

Reporting Owner Name / Address

Director 10% Owner Officer Other

GROMEK JOSEPH R

C/O 9341 COURTLAND DRIVE NE X

ROCKFORD, MI 49351

anv

# **Signatures**

Security

/s/ David Latchana, by Power of
Attorney

10/03/2018

\*\*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) Award of stock units pursuant to Outside Directors' Deferred Compensation Plan. Shares of common stock are issuable on a one-for-one basis in either a lump sum or installments after termination of service as a director or upon a change in control of the company.

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.

Reporting Owners 2