Edgar Filing: GOWLAND KAREN E - Form 4

GOWLAND	KAREN E											
Form 4												
February 26,												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								т	OMB APPROVAL			
								OMB Number:	3235-0287			
Check this	s box		vv as	inington,	D.C. 20.	J - J				January 31		
if no longe	er STATE	MENT O	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF	Expires:	2005		
subject to Section 16	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16 SECURITIES							Estimated a				
Form 4 or									burden hours per response 0.5			
Form 5	Filed pu	irsuant to	Section 16	6(a) of the	e Securiti	ies Ez	xchang	ge Act of 1934,	•			
obligation may contin		(a) of the	Public Ut	ility Hold	ling Com	pany	Act o	of 1935 or Section	on			
See Instru		30(h)	of the Inv	vestment	Compan	y Act	of 19	40				
1(b).												
(Duint on Tom o D)											
(Print or Type R	esponses)											
1. Name and Address of Reporting Person _ 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s)								son(s) to				
GOWLAND KAREN E Symbol Issuer												
BOISE CASCADE Co [BCC]												
(Last)	(Chec.						k all applicable)					
(Last)	(1131)	(winduic)		 Date of Earliest Transaction Month/Day/Year) 				_X_ Director10% Owner				
				02/22/2019				Officer (give title Other (specify				
COMPANY,	1111 WEST							below)	below)			
JEFFERSON	STREET, SU	ITE 300										
	(Street)		4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				Filed(Month/Day/Year)				Applicable Line)				
X Form filed by C								One Reporting Person Iore than One Reporting				
BOISE, ID 8	3702							Person		eporting		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f. or Beneficia	llv Owned		
1.Title of	2. Transaction D	ate 24 De		3.	4. Securi			5. Amount of	6. Ownership	-		
Security	(Month/Day/Yea		Execution Date, if any		onAcquired		or		Form: Direct	Indirect		
(Instr. 3)					Code Disposed of (D)				(D) or	Beneficial Ownership		
		(Month	/Day/Year)	(Instr. 8) (Instr. 3, 4 and 5)		Owned Following	Indirect (I)					
							Reported	(Instr. 4)	(Instr. 4)			
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common						. ,						
Stock, par	02/22/2019			А	3,731 (1)	А	\$0	9,149	D			
value \$0.01					<u> </u>							

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)

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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
GOWLAND KAREN E C/O BOISE CASCADE COMPANY 1111 WEST JEFFERSON STREET, BOISE, ID 83702		Х						
Signatures								
Jill M. Twedt, by power of atty	02/26/2019							

**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) Each restricted stock unit represents a contingent right to receive one share of Boise Cascade Company common stock. The restricted stock units vest and become deliverable on February 22, 2020.

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.