Edgar Filing: NELSON RONALD L - Form 4

NELCON DONAL DI

Form 4	UNALD L										
October 17,	2017										
FORM A									OMB APPROVAL		
	SECURITIES AND EXCHANGE CO Washington, D.C. 20549					OMMISSION	OMB Number:	3235-0287			
Check th if no lon	oer.										
subject t Section Form 4 o Form 5	o STATEN 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								2005 werage rs per 0.5	
obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	a) of the l	Public U	tility Hol		pany	Act of	Act of 1934, 1935 or Section)	l		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> NELSON RONALD L			8					5. Relationship of Reporting Person(s) to Issuer			
			[CAR]	JUD GET	lei okooi, itte.			(Check all applicable)			
(Last) (First) (Middle) 6 SYLVAN WAY			3. Date of Earliest Transaction (Month/Day/Year) 10/13/2017					_X_ Director10% Owner _X_ Officer (give titleOther (specify below) below)			
0 DIL VIII									tive Chairman		
	(Street)			endment, D nth/Day/Yea	ate Original			 6. Individual or Joi Applicable Line) 	nt/Group Filin	g(Check	
PARSIPPA	NY, NJ 07054		T neu(ino	nui/Day/Tea	1)			_X_ Form filed by O Form filed by M Person			
(City)	(State)	(Zip)							-		
							-	ired, Disposed of,		-	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securitie our Dispose (Instr. 3, 4	d of (Ê))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)			
Common Stock	10/13/2017			S <u>(1)</u>	250,000	D	41.02 (2)	260,714	D		
Common Stock								15,472	I <u>(3)</u>	By trust	

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.

Edgar Filing: NELSON RONALD L - Form 4

 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Under Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
NELSON RONALD L 6 SYLVAN WAY PARSIPPANY, NJ 07054	Х		Executive Chairman					
Signatures								

/s/ Jean M. Sera, by Power of Attorney for Ronald L. Nelson	10/17/2017		
**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) The sale of the shares was made pursuant to a pre-established 10b5-1 plan.
- Price reflects the weighted average sale price for the sale transactions made on the date reported above. Sale prices ranged from \$40.47 to
 (2) \$41.38. Mr. Nelson will provide, upon request by the Staff, the Company, or a security holder of the Company, full information regarding the number of shares purchased or sold at each separate price.
- Securities are held by a family trust. Mr. Nelson's wife is a trustee of the trust. Mr. Nelson disclaims beneficial ownership of the securities
- (3) held by the trust, and the filing of this report is not an admission that Mr. Nelson is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

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.