### **GLATFELTER PHCO** Form 4

April 03, 2017

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 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).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* Beck Eileen L

(First)

(Street)

(Middle)

2. Issuer Name and Ticker or Trading

Symbol

GLATFELTER P H CO [GLT] 3. Date of Earliest Transaction

(Month/Day/Year)

96 S. GEORGE STREET, SUITE 520

04/01/2017

4. If Amendment, Date Original

Filed(Month/Day/Year)

Director 10% Owner X\_ Officer (give title Other (specify

5. Relationship of Reporting Person(s) to

(Check all applicable)

below) Vice Pres., Human Resource

6. Individual or Joint/Group Filing(Check

Applicable Line)

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

Person

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

Issuer

YORK, PA 17401

1. Title of

Security

(Instr. 3)

(City) (State) (Zip)

(Month/Day/Year)

2. Transaction Date 2A. Deemed

3. 4. Securities

Execution Date, if Code (Month/Day/Year)

TransactionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (T) (Instr. 4) (Instr. 4)

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

(A)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 3. Transaction Date 3A. Deemed 5. Number 6. Date Exercisable and Derivative Conversion (Month/Day/Year) Execution Date, if Transaction of Derivative Expiration Date Securities Security or Exercise Code (Month/Day/Year) any

7. Title and Amou

Underlying Securi

(Instr. 3 and 4)

### Edgar Filing: GLATFELTER P H CO - Form 4

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	3)	Acquired (A) or Disposed (D) (Instr. 3, and 5)	d of				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Nun of Shar
Performance Stock Award	<u>(1)</u>	04/01/2017		A		6,210		12/31/2019(2)	03/15/2020	Common Stock, Par Value \$.01	6,2
Restricted Stock Units	<u>(3)</u>	04/01/2017		A		4,140		04/01/2020	04/01/2020	Common Stock, Par Value \$.01	4,1

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Beck Eileen L

96 S. GEORGE STREET

SUITE 520 Vice Pres., Human Resource

YORK, PA 17401

### **Signatures**

Linda M. Levans by POA 04/03/2017

\*\*Signature of Reporting Date

Person

### **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) Not applicable to this transaction
- (2) This is a Performance Share Award with a performance period of 1/1/2017-12/31/2018, and a one year vesting tail through 12/31/2019.
- (3) Not applicable to this transaction. RSUs have no value until all restrictions lapse on the final vesting date.

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