Edgar Filing: Rexnord Corp - Form 4

Rexnord Corp

Rexnord Cor Form 4	р								
October 18, 2	2016								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB APPROVAL			
						OMB Number:	3235-0287		
Check the		vi asimigion	, D.C. 2004)			Expires:	January 31,		
if no long subject to			GES IN BENEFICIAL OWNER			Estimated a	2005 average		
Section 1 Form 4 o		SECURITIES					rs per		
Form 5		to Section 16(a) of the	ne Securities Ex	change Ac	t of 1934.	response	0.5		
obligation may cont	$\frac{1}{1}$ Section $17(a)$ of	he Public Utility Ho	lding Company	Act of 193		n			
See Instru	·) ((h) of the Investmen	t Company Act	of 1940					
1(b).									
(Print or Type I	Responses)								
	ddress of Reporting Persor OUL THOMAS		2. Issuer Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer			
cindifici		Symbol Rexnord Corp []	RXNI						
(Last)	(First) (Middle)	3. Date of Earliest T	-		(Chec	k all applicable	e)		
		(Month/Day/Year)				_X_ Director10% Owner			
4701 WEST GREENFIELD AVENUE		10/17/2016		belov	Officer (give title below) Other (specify below)				
AVENUE	(Street)	4 If Amondmont D	ata Original	6 I.	dividual an Is	int/Crown Filis	o c (Classila		
	(Silect)		4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line)			
		`` `	,	_X_	_X_Form filed by One Reporting Person Form filed by More than One Reporting				
MILWAUK	EE, WI 53214			Perso	•		porting		
(City)	(State) (Zip)	Table I - Non-	Derivative Securit	ties Acquired	l, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date 2A.		4. Securities Ac			6. Ownership			
Security (Instr. 3)	(Month/Day/Year) Exe any	cution Date, if Transact Code	ion(A) or Disposed (D)		Beneficially (Owned I	Form: Direct (D) or	Beneficial Ownership		
(11041-0)	-	nth/Day/Year) (Instr. 8)	· · /	5) Own		Indirect (I)			
			(•)		owing orted	(Instr. 4)	(Instr. 4)		
			(A) or	Tran	saction(s)				
Com		Code	Amount (D)	Price (Inst	r. 3 and 4)				
Common Stock	10/17/2016	A <u>(1)</u>	1,178 A	\$ 12,3 19.1	373	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)

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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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. De Se (Ir
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 20.18					(2)	02/26/2023	Common Stock	11,657	
Stock Option (right to buy)	\$ 29.31					09/03/2015 <u>(3)</u>	09/03/2024	Common Stock	10,320	

Reporting Owners

 Reporting Owner Name / Address
 Relationship

 Director
 10% Owner
 Officer
 Other

 CHRISTOPOUL THOMAS
 X
 Value
 Value
 Value

 A701 WEST GREENFIELD AVENUE
 X
 Value
 Value
 Value

 MILWAUKEE, WI 53214
 X
 Value
 Value
 Value

 Signatures
 Value
 Value
 Value
 Value
 Value

 /s/ Jeffrey J. LaValle under Power of Attorney for Thomas D.
 Christopoul
 Value
 Value
 Value

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).

10/18/2016

Date

- (1) Payment of director fees in stock.
- (2) Option fully vested.
- (3) The original option vests in three annual installments beginning on the date listed above.

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.