### Edgar Filing: Fogarty Kevin Michael - Form 4

Fogarty Kevin M Form 4 May 09, 2012	ichael											
										OMB A	PPROVA	۹L
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB 32 Number:		-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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									Expires: Estimated burden hou response	urs per	ry 31, 2005 0.5
(Print or Type Respon	nses)											
1. Name and Address of Reporting Person <u>*</u> Fogarty Kevin Michael			2. Issuer Name <b>and</b> Ticker or Trading Symbol GLATFELTER P H CO [GLT]					5. Relationship of Reporting Person(s) to Issuer				
(Last) (	Middle)	3. Date of Earliest Transaction					(Check all applicable)					
96 S. GEORGE STREET, SUITE500			(Month/Day/Year) 05/08/2012				X_ Director 10% Owner Officer (give title Other (specify below) below)					
( YORK, PA 1740	4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>						
								Person				
(City) (	State)	(Zip)	Tab	le I - Non-l	Derivat	ive Securi	ties A	cquired, Disposed	of,	or Beneficia	lly Owne	d
	nsaction Date th/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Dispos (Instr.	red (A) or sed of (D) 3, 4 and 5 (A) or	) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	For (D) (I)	Ownership rm: Direct ) or Indirect str. 4)	7. Nature Indirect Benefici: Ownersh (Instr. 4)	al iip
Reminder: Report on	a separate line	for each cl	ass of sect	urities bene	Per info req dis	sons wh ormation uired to	o res conta respo	or indirectly. pond to the colle ained in this forr and unless the fo atly valid OMB co	m ai orm	re not	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)		Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Restricted Stock Units	<u>(1)</u>	05/08/2012		А		5,330		05/05/2015 <u>(2)</u>	05/05/2015	Common Stock, Par Value \$ 01	5,330

# **Reporting Owners**

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Fogarty Kevin Michael 96 S. GEORGE STREET SUITE500 YORK, PA 17401	Х								
Signatures									
Linda M. Levans by POA	05/09/20	12							

<u>\*\*</u>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) Not applicable to this transaction. RSUs have no value until vested.
- (2) This grant vests one-third on 5/8/2013, one-third on 5/8/2014, and the final one-third vests, and all restrictions lapse, on the day prior to the 2015 Annual Meeting, or approximately 5/5/2015.

### **Remarks:**

No securities were beneficially owned when this reporting person became an insider.

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.