Edgar Filing: AK STEEL HOLDING CORP - Form 4

AK STEEL I	HOLDING CO	RP										
Form 4												
February 24,	_											
FORM	14 UNITED) STATE	SSECUR	ITIFS	<u>۸</u> ۳	ND FXC	ΉΛΝ	JCF (COMMISSION	-	PPROVAL	
	UNITEI	JOIAIL				D.C. 205			201411411551014	OMB Number:	3235-0287	
Check thi					-, -		•			Expires:	January 31,	
if no long subject to		MENT O	F CHAN	GES IN BENEFICIAL OWN				OW	NERSHIP OF	Estimated a	2005 average	
-	Section 16. S				SECURITIES					burden hou		
Form 4 or Form 5			G .: 1.			a	Б	1	A . 61024	response 0.8		
obligation	no *							•	e Act of 1934,	n		
may cont	inue.) of the In	•		.			f 1935 or Sectio 10	Π		
See Instru 1(b).	iction	50(11)) of the m	vestmen		Joinpany	1101	0117-	10			
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(Print or Type R	Responses)											
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Lauschke Sc	ddress of Reportin. Cott M		2. Issuer Symbol	er Name and Ticker or Trading				5	5. Relationship of Reporting Person(s) to Issuer			
Symbol				K STEEL HOLDING CORP								
									(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest 7	Гraı	nsaction			Director	10%	Owner	
				lonth/Day/Year)					XOfficer (give titleOther (specify below) below)			
9227 CENT	RE POINTE D	RIVE	02/23/20	015					· · · · · · · · · · · · · · · · · · ·	and Customer S	ervice	
(Street) 4. I			4. If Ame	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
				ed(Month/Day/Year)					Applicable Line)			
									X Form filed by (Form filed by N	One Reporting Pe Iore than One Re		
WEST CHE	STER, OH 450	169							Person		r8	
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	ecurit	ies Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.		4. Securit	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea						of	Securities	Form: Direct			
(Instr. 3)		Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 a			and 5)		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
		(X	/	(,	Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported Transaction(s)			
				Code	V 7	Amount	or	Durias	(Instr. 3 and 4)			
Common							(D)	Price				
Stock	02/23/2015			А		30,000	А	\$0	30,000	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)

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. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Derivative Expiration Date Gecurities (Month/Day/Year) Acquired (A) or Disposed of D) Instr. 3, 4,		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy)	\$ 4.555	02/23/2015		А	10,000	02/23/2016 <u>(1)</u>	02/23/2025	Common Stock	10,0

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Lauschke Scott M 9227 CENTRE POINTE DRIVE WEST CHESTER, OH 45069			VP, Sales and Customer Service				
Signatures							

/s/ Scott M. 02/24/2015 Lauschke **Signature of Date

Reporting 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) Options vest in three equal annual installments beginning one year after grant 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.