Edgar Filing: Altmeyer John W - Form 4

| Altmeyer John Form 4 June 04, 2018 | | | | | | | | | | |
|---|---|---|--|--|---------------------------------|--|--|--|---|--|
| FORM | Л | | | | | | | | PPROVAL | |
| | UNITEDS | TATES SECUR Was | ITIES AI hington, 1 | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check this if no longe subject to Section 16 Form 4 or | ENT OF CHAN | GES IN H SECURI | | CIA | L OW | NERSHIP OF | Expires: Estimated a burden hou | irs per | | |
| Form 5 obligations may contin <i>See</i> Instruct 1(b). | s Section 17(a) | uant to Section 10) of the Public Ut 30(h) of the In | ility Hold | ing Com | pany | Act o | f 1935 or Sectio | response | 0.5 | |
| (Print or Type Re | esponses) | | | | | | | | | |
| 1. Name and Ad Altmeyer Joh | Symbol | Name and | | | g | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) | | | | - | | | (Check all applicable) | | | |
| 644 SOUTH | (Month/D 06/01/20 | - | | | | _X_Director10% Owner Officer (give titleOther (specify below) below) | | | | |
| | | | mendment, Date Original Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MECHANIC | SBURG, PA 170 |)55 | | | | | Form filed by M Person | More than One Re | eporting | |
| (City) | (State) (Z | Zip) Table | e I - Non-Do | erivative S | ecuri | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactic Code (Instr. 8) Code V | 4. Securit onAcquired Disposed (Instr. 3, Amount | (A) of (D 4 and (A) or |) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 06/01/2018 | | А | 3,515 (1) | A | \$0 | 23,504 <u>(2)</u> | 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) | 4. Transac Code (Instr. 8 | of De Se Ac (A Di of (Ir | onNumber Expira | | 6. Date Exerc Expiration D (Month/Day/ | Date Am ay/Year) Una Sec | | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|------------------------------------|---|-----------------|--|--|--------------------------------|-------|---|---|--|
| | | | Code | V (A | .) (I | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | | |
| Altmeyer John W 644 SOUTHRIDGE DRIVE MECHANICSBURG, PA 17055 | Х | | | | | | | |
| Signatures | | | | | | | | |
| By Maxine L. Mauricio, Attorney-in-Fact | 06/04/2018 | | | | | | | |
| **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).
- The shares reported herein as acquired represents shares of common stock issuable in the future with respect to restricted stock units (1) ("RSUs") granted to the reporting person.
- (2) Includes shares issuable in respect of RSUs.

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.