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Form 4 December 01, 2											
FORM	4								OMB AF	PROVAL	
	UNITED S	TATES					GE CO	OMMISSION	OMB Number:	3235-0287	
Check this b if no longer subject to Section 16. Form 4 or Form 5	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: January 31 2005 Estimated average burden hours per response 0.5		
obligations may continu <i>See</i> Instruct 1(b).	Bection 17(a) of the		lity Hold	ling Comp	any A	Act of 1	Act of 1934, 935 or Section			
(Print or Type Res	sponses)										
			2. issuer raune und riener or ridding					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	iddle)	3. Date of Earliest Transaction (Check				k all applicable)				
1716 LOCUS	T STREET		(Month/Da) 11/29/20	-				Director _X Officer (give t below) Chief F		Owner er (specify er	
DES MOINES	(Street) 5, IA 50309		4. If Amend Filed(Month		-		-	5. Individual or Joi Applicable Line) X_ Form filed by Or Form filed by Mo	ne Reporting Pe	rson	
(City)		Zip)	Table	I - Non-D	erivative So	curiti		Person	or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)	Execut any		3. Transact Code (Instr. 8)	4. Securit ior(A) or Di (Instr. 3,	ties Ac sposed	equired l of (D)	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 (\$1 par value) (1)	11/29/2017			M	18,000	A	\$ 45.69	18,001	D		
Common Stock (\$1 par value) (1)	11/29/2017			F	14,801	D	\$ 69.38	3,200	D		
Common Stock (Restricted) (\$1 par value) (2)								7,694	D		

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Common			By
Stock (\$1	1,281	Ι	managed
par value) (3)			account

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. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		on Date, if TransactiorDerivative Expiration Date Code Securities (Month/Day/Year) /Day/Year) (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and A Underlying S (Instr. 3 and	Secur	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am or Nu of S
Non-Qualified Stock Option (right to buy)	\$ 45.69	11/29/2017		М		18,000	08/12/2017	08/12/2024	Common Stock (\$1 par value)	18

Reporting Owners

Reporting Owner Name / Address	Relationships						
I O	Director 10% Owner Officer		Officer	Other			
Ceryanec Joseph H 1716 LOCUST STREET DES MOINES, IA 50309			Chief Financial Officer				
0:							

Signatures

By: Kara Brodell, by Power of Attorney For: Joseph H. Ceryanec

**Signature of 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).

12/01/2017

Date

(1) Shares held by the reporting person in street name.

(2) Shares were awarded pursuant to the Meredith Corporation Stock Incentive Plans. The shares are subject to forfeiture and are nontransferable until vested, either on the third or the fifth anniversary of the grant date, as specified in each award agreement.

(3) Shares held in reporting person's Meredith Corporation Savings & Investment Plan. Quarterly dividends on the accounts are paid in the form of additional common stock, \$1 par value.

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.