Edgar Filing: BOISE CASCADE Co - Form 4

BOISE CASC	CADE Co											
Form 4												
March 13, 20	14											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								т	OMB APPROVAL			
								OMB Number:	3235-0287			
Check this			· · u b	g, -	210120	•••			Expires:	January 31,		
if no long subject to	er STATEN	AENT O	F CHAN	GES IN H	BENEFI	CNEFICIAL OWNERSHIP OF			•	2005		
Section 16	ó.			SECURITIES						Estimated average burden hours per		
Form 4 or									response 0.			
Form 5	· ·						-	ge Act of 1934,				
obligation may conti				•	•			of 1935 or Section	n			
See Instru		30(h)	of the Inv	vestment (Company	y Act	of 19	40				
1(b).												
(Print or Type R	esponses)											
(Third of Type R	esponses)											
1. Name and Address of Reporting Person [*] _2. Issuer Name and Ticker or Trading 5. Relationship of							f Reporting Per	Reporting Person(s) to				
HIBBS KEL			Symbol	Traine and Tieker of Training				Issuer				
BOISE CA					E Co [B	CC]						
(Last)	(First) (Middle)	3 Date of	Earliest Tra	nsaction	-		(Cheo	ck all applicable	e)		
			(Month/Da				Director 10% Owner					
C/O BOISE CASCADE 02/27/20				•				_X_Officer (give titleOther (specify				
COMPANY, 1111 WEST								below) VP	below) and Controller	er		
JEFFERSON	I STREET, SUI	TE 300										
(Street) 4. If Amo			4. If Amer	endment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mo				Month/Day/Year)				Applicable Line)				
Form filed by								One Reporting Person More than One Reporting				
BOISE, ID 8	3702							Person	note than one to	oporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Dat	te 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year	r) Execution Date, if		TransactionAcquired (A) or				Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month	Day/Vaar)	Code Disposed of (D) (Instr. 8) (Instr. 2.4 and 5)			· ·	(D) or Indirect (I)	Beneficial Ownership (Instr. 4)			
		(INIOIIUI	(Month/Day/Year)		(Instr. 8) (Instr. 3, 4 and 5)			Following		(Instr. 4)		
						(A)		Reported	. ,			
						or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common					• • • • •		b 0	• • • • •	-			
Stock, par	02/27/2014			А	2,061	А	\$0	2,061	D			
value \$0.01												

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)

Reporting Owners

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
HIBBS KELLY E. C/O BOISE CASCADE COMPANY 1111 WEST JEFFERSON STREET, SUI BOISE, ID 83702	ITE 300		VP and Controller					
Signatures								
/s/ John T. Sahlberg, as Attorney in Fact	03/13/2014							
**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).

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.