Edgar Filing: BOISE CASCADE Co - Form 4

BOISE CAS	CADE Co											
Form 4												
January 05, 2	017											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										3 APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check thi				8,					Expires:	January 31,		
if no long subject to		MENT O	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF		2005		
Section 16. SECURITIE					ITIES	TIES			Estimated average burden hours per			
Form 4 or	•								response 0.			
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,												
may conti	Section 17			•	•	- ·		f 1935 or Sectio	n			
See Instru	ction	30(h)	of the In	vestment	Compan	y Act	t of 194	40				
1(b).												
(Print or Type R	esponses)											
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of I							f Reporting Pers	son(s) to				
STOKES NI	CK		Symbol					Issuer				
BOISE CASCADE Co [BCC]							1 11 11 11	all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			(Cnec	ck all applicable	e)		
``		`	(Month/D				Director	Director 10% Owner				
C/O BOISE CASCADE 01/04/2017				-								
COMPANY, 1111 WEST								below)	below) EVP, BMD			
JEFFERSON	N STREET, SUI	ITE 300										
				ndment, Date Original			6. Individual or Joint/Group Filing(Check					
				nth/Day/Year)				Applicable Line)				
BOISE, ID 8	33702							_X_ Form filed by 0 Form filed by M Person				
								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Da			3.				5. Amount of Securities	6. Ownership			
Security	(Month/Day/Year	·	Execution Date, if		Transaction(A) or Disposed of				Form: Direct	Indirect Beneficial		
(Instr. 3)		any (Month/	Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)				(D) or Indirect (I)	Ownership			
				Following	(Instr. 4)	(Instr. 4)						
				(A)				Reported Transaction(s)				
						or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price					
Common Stock, par	01/04/2017			F	1,225	D	\$	36,657	D			
value \$0.01	01/04/2017			1	(1)	D	23.6	50,057	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of lying	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

S

Reporting Owner Name / Address		Relationships						
r g	Director	10% Owner	Officer	Other				
STOKES NICK C/O BOISE CASCADE COMPANY 1111 WEST JEFFERSON STREET, SUI BOISE, ID 83702	TE 300		EVP, BMD					
Signatures								
/s/ John T. Sahlberg, Attorney-in-Fact	01/05/2017							
<u>**Signature of Reporting Person</u>	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).
- Includes (i) 690 shares withheld upon the satisfaction of time vesting conditions on December 31, 2016 with respect to the 2014 (1) performance stock unit award, and (ii) 535 shares withheld upon the satisfaction of time vesting conditions on December 31, 2016 with respect to the 2014 restricted stock unit award.

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.