Edgar Filing: COSTELLO ELLEN - Form 4

COSTELLO	ELLEN												
Form 4													
June 21, 2018	3												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL				
	- UNITED S	IAIES		hington				GE (_OMMISSION	OMB Number:	3235-0287		
Check thi	s box		vv as	anngton	,∎	J.C. 203	47				January 31,		
if no longer STATEMENT OF CH				ANGES IN BENEFICIAL OW					NERSHIP OF	Expires:	2005		
subject to STATEMENT OF CHAN Section 16.				SECURITIES						Estimated average burden hours per			
Form 4 or									response (
Form 5	Filed purs	uant to S	Section 10	6(a) of th	ne	Securiti	es Ex	chang	e Act of 1934,				
obligation may conti				•		. .			f 1935 or Sectio	n			
See Instru		30(h)	of the In	vestment	t C	Company	Act	of 194	40				
1(b).													
(Print or Type R	esponses)												
COSTELLO ELLEN			2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol DIEBOLD NIXDORF, Inc [DBD]					5. Relationship of Reporting Person(s) to Issuer				
	2												
(Last)	(First) (M	iddle)	3. Date of	Earliest T	rar	isaction			(Chec	k all applicable	e)		
			(Month/D	n/Day/Year)					XDirector10% Owner				
C/O DIEBOLD NIXDORF, 06/21/2				-					Officer (give title Other (specify below)				
	ATED, 5995 MA	YFAIR								001010)			
ROAD													
				f Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed(Mo				(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
NORTH CA	NTON, OH 4472	0							Form filed by N Person				
(City)	(State) (Zip)	Table						uired, Disposed of		-		
1.Title of Security	2. Transaction Date (Month/Day/Year)		med on Date, if	3. Transact					5. Amount of Securities	6. Ownership Form: Direct			
(Instr. 3)	(Wonul/Day/Tear)	any	ni Date, n	Transaction(A) or Disposed of Code (D)				01	Beneficially	(D) or	Beneficial		
			Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					5)	Owned	Indirect (I)	Ownership		
									Following Reported	(Instr. 4)	(Instr. 4)		
							(A)		Transaction(s)				
				Code V	V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common	06/21/2019					12,156			12 156 (2)	D			
Shares	06/21/2018			А		(1)	А	\$0	12,156 <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)

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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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					
1	Director	10% Owner	Officer	Other		
COSTELLO ELLEN C/O DIEBOLD NIXDORF, INCORPORATED 5995 MAYFAIR ROAD NORTH CANTON, OH 44720	X					
Signatures						
Jonathan B. Leiken, Attorney-in-fact for Ellen M. Costello		06/21	/2018			
<u>**</u> Signature of Reporting Person		Dat	e			

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).
- Award of restricted stock units; each restricted stock unit represents a contingent right to receive one share of Diebold Nixdorf, (1) Incorporated common stock.
- (2) Number includes restricted stock units.

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.