## Edgar Filing: SMITH DANIEL T - Form 4

CMITH DANIEL T

SMITH DAN	IEL T										
Form 4											
February 07,	2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									APPROVAL		
Was				shington, D.C. 20549					Number:	3235-0287	
Check this box if no longer									Expires:	January 31,	
subject to	F CHAN	CHANGES IN BENEFICIAL OWN				NERSHIP OF	Estimated a	2005 average			
Section 16.				SECURITIES					burden hou response	rs per	
Form 4 or Form 5		ursuant to	Section 1	5(a) of the	) of the Securities Exchange Act of 1934,					0.5	
obligation	<sup>8</sup> Section 1'						-	f 1935 or Section	n		
may conti <i>See</i> Instru	nue.		) of the In	•	•						
1(b).	•				_						
	<b>`</b>										
(Print or Type R	esponses)										
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to										son(s) to	
SMITH DANIEL T Symbol								Issuer			
•				ens Corning [OC]				(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			(Chec	k all applicable	;)	
(Month/D				th/Day/Year)				Director 10% Owner			
			05/2018				_X_ Officer (give title Other (specify below) below)				
PARKWAY								Sr. VP Or	ganization & A	dmin	
			4. If Ame	Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Mon	d(Month/Day/Year)				Applicable Line)			
TOLEDO, OH 43659								_X_Form filed by One Reporting Person Form filed by More than One Reporting			
IOLEDO, O	n 43039							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 D	ate 2A. Dee	emed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea		on Date, if	Transaction(A) or Disposed of				Securities	Form: Direct (D) or	Indirect	
(Instr. 3) any (Month/Day/Year)			/Day/Year)	× /				Beneficially Owned	Beneficial Ownership		
	Folle						Following	Indirect (I) (Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)			
				Codo V	Amount	or	Drigo	(Instr. 3 and 4)			
\$.01 Par				Coue V	Amount	(D)	Price				
Value	02/05/2018			F	3,200 (1)	D	\$ 86.3	64,462.328	D		
Common					(1)		80.5				

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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Unde Secur	ınt 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**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
SMITH DANIEL T ONE OWENS CORNING PARKWAY TOLEDO, OH 43659			Sr. VP Organization & Admin				
Signatures							
/s/ Omar N. Chaudhary, Attorney-in-Fact	02/	07/2018					
<u>**</u> 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).
- (1) Shares automatically withheld upon vesting of restricted stock to satisfy tax withholding obligations.

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.