ZWIERS JAMES D

Form 4

February 19, 2009

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB

Washington, D.C. 20549

3235-0287 Number: January 31, Expires:

2005

OMB APPROVAL

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per 0.5

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

5 D 1 (* 1 * CD - (* D - () (

1(b).

(Print or Type Responses)

1 Name and Address of Departing De

02/17/2009

02/18/2009

Stock

Stock

Common

| 1. Name and Address of Reporting Person ZWIERS JAMES D (Last) (First) (Middle) 9341 COURTLAND DRIVE NE | | | S | 2. Issuer Name and Ticker or Trading Symbol WOLVERINE WORLD WIDE INC /DE/ [WWW] 3. Date of Earliest Transaction (Month/Day/Year) 02/17/2009 | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% OwnerX Officer (give title Other (specify below) Senior Vice President | | | |
|--|--------------------------------------|--------------------------------------|--|---|---|---|-------|----------------|--|--|---|--|
| | | | (1 | | | | | | | | | |
| (Street) ROCKFORD, MI 49351 | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| | (City) | | (Zip) | Table | e I - Non-D | erivative S | Secur | ities Acq | Person uired, Disposed of | · | | |
| | 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution I any (Month/Day | Date, if | 3. Transaction Code (Instr. 8) | 4. Securit on(A) or Di (Instr. 3, | spose | d of (D) 5) | 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 | 02/17/2000 | | | E | 262 | D | \$ | 57 271 | D | | |

262

693

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

F

F

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

57,371

56,678

D

D

Edgar Filing: ZWIERS JAMES D - Form 4

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. Transactic Code (Instr. 8) | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | | ate | Amour Underl Securit | 7. Title and Amount of Inderlying Securities Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|----------------------------|--|---|---|
| | | | | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

ZWIERS JAMES D 9341 COURTLAND DRIVE NE ROCKFORD, MI 49351

Senior Vice President

Signatures

/s/ Timothy E. Foley, by Power of 02/19/2009 Attorney

> **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.

Reporting Owners 2