### Edgar Filing: HEXCEL CORP /DE/ - Form 4

HEXCEL C Form 4	CORP /DE/									
February 16	5, 2017									
FORM		STATES	SECU	DITIFS A	ND FY	CHANCE	COMMISSIO	NT.	PPROVAL	
	UNITED	STATES		ashington.				N OMB Number:	3235-0287	
Check this box if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSH							Expires:	January 31, 2005		
						WNERSHIP OF	Estimated			
Section 16. SECURITIES Form 4 or							burden hou response	•		
Form 5 obligati	one						nge Act of 1934,			
may con	ntinue. Section 17(			•	•	<b>•</b> •	of 1935 or Secti	on		
<i>See</i> Inst 1(b).	ruction	50(II)	of the I	nvesunem	Compar	ny Act of 1	940			
(Print or Type	Responses)									
1. Name and	Address of Reporting	Person <sup>*</sup>	2. Issue	er Name <b>an</b> o	<b>d</b> Ticker or	Trading	5. Relationship of Reporting Person(s) to			
GRAVES	JEFFREY A		Symbol				Issuer			
			HEXCEL CORP /DE/ [HXL]				(Check all applicable)			
(Last)					X Director 10% Owner					
C/O HEXO	CEL		(Month/Day/Year) 02/15/2017				Officer (give title Other (specify			
	ATION, 281 TRES	SSER					below)	below)		
BLVD., 16	TH FLOOR									
			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line)				
			T Hea(III	Shill Duy I cu	-)		_X_ Form filed by			
STAMFOR	RD, CT 06901						Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date			3.	4. Securit		5. Amount of	6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution any	Date, 1f	Transactio Code	nAcquired Disposed		Securities Beneficially	Form: Direct (D) or Indirect	Indirect Beneficial	
· · /		-	ay/Year)	(Instr. 8)	(Instr. 3, 4	4 and 5)	Owned Following	(I) (Instr. 4)	Ownership (Instr. 4)	
						( )	Following Reported	(Instr. 4)	(Instr. 4)	
						(A) or	Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D) Price	(Insu: 5 and 4)			
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities benef	ficially ow	ned directly	or indirectly.			
							spond to the colle ained in this form		SEC 1474 (9-02)	
					requir	red to resp	ond unless the fo	rm	()-02)	
displays a currently valid OMB control number.										
	Tab					posed of, or convertible :	Beneficially Owner securities)	d		
			,	,	, <u>,</u> , , , , , , , , , , , , , , , , ,					

1. Title of<br/>Derivative2.3. Transaction Date3A. Deemed4.5. Number6. Date Exercisable and<br/>Expiration Date7. Title and Amount of<br/>Underlying Securities8. Price<br/>Derivation1. Title of<br/>Derivative2.3. Transaction Date3A. Deemed4.5. Number6. Date Exercisable and<br/>Expiration Date7. Title and Amount of<br/>Underlying Securities8. Price

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Deriva Securi Acqui (A) or Dispos of (D) (Instr. and 5)	ties red sed 3, 4,	(Month/Day	/Year)	(Instr. 3 and 4)		Securi (Instr.
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units (1)	<u>(1)</u>	02/15/2017		А	4.56 (2)		(3)	<u>(3)</u>	Common Stock	4.56	<u>(1</u>
Restricted Stock Units (1)	<u>(1)</u>	02/15/2017		А	5.29 (4)		(3)	<u>(3)</u>	Common Stock	5.29	<u>(1</u>
Restricted Stock Units (1)	<u>(1)</u>	02/15/2017		А	4.96 (5)		(3)	(3)	Common Stock	4.96	<u>(1</u>

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
reporting of the Linne ( Linne (	Director	10% Owner	Officer	Other			
GRAVES JEFFREY A C/O HEXCEL CORPORATION 281 TRESSER BLVD., 16TH FLOOR STAMFORD, CT 06901	Х						
Signatures							
/s/Dr. Jeffrey A. Graves by Adam P. Go Attorney-in-fact	ld,		02/1	5/2017			
<b>**</b> Signature of Reporting Person			D	ate			

# **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) The underlying Restricted Stock Units ("RSUs") were granted in a transaction exempt under Rule 16b. Upon vesting, RSUs are converted into an equivalent number of shares of Common Stock that are distributed to the grantee.

As previously reported, on May 7, 2015, the reporting person was granted 2,169 RSUs. Dividend equivalent rights accrue with respect to the unvested RSUs when and as dividends are paid on Hexcel common stock. The 4.56 dividend equivalent rights reflect dividend

(2) The unvested KSOS when and as dividends are paid on Plexeer common stock. The 4.50 dividend equivalent rights reflect dividend equivalent rights at \$53.08 per RSU owned by the reporting person on the record date and credited to the reporting person's account on February 15, 2017.

The underlying RSUs vest ratably over the one year period following the grant date, and convert into an equal number of shares of (3) common stock at such time as the grantee ceases to be a member of Hexcel's Board of Directors. Vesting and conversion are subject to certain acceleration and termination provisions.

### Edgar Filing: HEXCEL CORP /DE/ - Form 4

As previously reported, on May 8, 2014, the reporting person was granted 2,508 RSUs. Dividend equivalent rights accrue with respect to the unvested RSUs when and as dividends are paid on Hexcel common stock. The 5.29 dividend equivalent rights reflect dividend

(4) In the unvested RSUS when and as dividends are paid on Prexer common stock. The 5.29 dividend equivalent rights at \$53.08 per RSU owned by the reporting person on the record date and credited to the reporting person's account on February 15, 2017.

As previously reported, on May 5, 2016, the reporting person was granted 2,382 RSUs. Dividend equivalent rights accrue with respect to the unvested RSUs when and as dividends are paid on Hexcel common stock. The 4.96 dividend equivalent rights reflect dividend

(5) The unvested KSOS when and as unvidends are paid on nexcer common stock. The 4.96 unvidend equivalent rights reflect dividend equivalent rights at \$53.08 per RSU owned by the reporting person on the record date and credited to the reporting person's account on February 15, 2017.

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.