Edgar Filing: THOMSON JAMES A - Form 4

THOMSON	JAMES A											
Form 4												
January 04,	2018											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287			
Check this box										January 31,		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP C						ERSHIP OF	Estimated average					
Section		SECURITIES							burden hours per			
Form 4 o Form 5							A . 4 . £ 1024	response	0.5			
obligatio	no -						-	Act of 1954, 1935 or Section				
may con	tinue.			•	t Company	•						
See Instr 1(b).	ruction	50(II)	of the fi	ivestillen	Company	1101 0	1 1 7 70	, 				
1(0).												
(Print or Type	Responses)											
	Address of Reporting JAMES A	Person [*]		er Name an	d Ticker or Tr	ading		5. Relationship of Reporting Person(s) to				
THOMSON	N JAMES A		Symbol			DD	1	155001				
				EEL HOI	LDING CO	RP		(Check all applicable)				
			[AKS]									
			te of Earliest Transaction				X_ Director 10% Owner Officer (give titleX_ Other (specify					
				Day/Year)			Ī	below) below)				
9227 CENTRE POINTE DRIVE 01/02/2				2018				Chairman of the Board				
(Street) 4. If Ame			nendment, Date Original				6. Individual or Joint/Group Filing(Check					
Filed(Month/Day/Year)					r)		Applicable Line) _X_ Form filed by One Reporting Person					
WEST CHI	ESTER, OH 4506	0					-	Form filed by Mo				
WL51 CIII	L91LR, 011 +500						1	Person				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative Se	curitie	s Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Execution Date, if		4. Securities order Disposed (Instr. 3, 4 au	of (D)	red (A)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	. ,		
Common Stock	01/02/2018			А	4,795.663 (1)	A	\$0	156,329.143 (2)	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)

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. Transac Code (Instr. 8	5. tionNumber of) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3,	(Month/Day/Year) vative urities uired or posed D)		Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code	4, and 5) V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
THOMSON JAMES A 9227 CENTRE POINTE DRIVE WEST CHESTER, OH 45069	Х			Chairman of the Board				
Signatures								
/s/ Joseph C. Alter, attorney-in-fac Thomson	01/04/2018							
<u>**</u> Signature of Reporting Perso	on	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) The securities reported in this column consist of restricted stock units which give the reporting person a contractual right to receive at a future date one share of common stock of AK Steel Holding Corporation for each restricted stock unit held.
- (2) The number of securities reported in this column includes 22,867.143 restricted stock units held by the reporting person as of the date of this filing.

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.