#### FLETCHER JEREMY ADAM

Form 4

January 22, 2018

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

**OMB APPROVAL** 

if no longer subject to Section 16.

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

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Form 4 or Form 5 obligations may continue.

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...

Estimated average

burden hours per

See Instruction 1(b).

Stock

(Print or Type Responses)

1. Name and A	M Symbol	LLY AUT	Ticker or Trading OMOTIVE INC	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)	(First) (N		of Earliest Tr Day/Year)	ransaction	DirectorX Officer (g	rive titleO	0% Owner ther (specify	
233 S. PAT	TERSON AVE	01/19/2	2018		below) SVP OF FI	below) INANCE/CON	ΓROLLER	
	(Street)	4. If Am	endment, Da	nte Original	6. Individual or	Joint/Group Fi	ling(Check	
SPRINGFI	Filed(Month/Day/Year)  SPRINGFIELD, MO 65802		·)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip) Tab	le I - Non-D	Derivative Securities Ac	quired, Disposed	of, or Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	

Security	(Monul/Day/Tear)	Execution Date, ii	Transactio	$\Pi(\mathbf{A})$ of $\mathbf{D}$	ispose	u oi	Securities	Ownership	manect
(Instr. 3)		any	Code (D)		Beneficially	Form: Direct	Beneficial		
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned	(D) or	Ownership
							Following	Indirect (I)	(Instr. 4)
					(4)		Reported	(Instr. 4)	
					(A)		Transaction(s)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock	01/19/2018		M(1)	4,000	A	\$ 38.6	4,900	D	
Common Stock	01/19/2018		S(1)	4,000	D	\$ 270	900 (2)	D	
Common							212	т	Indirectly in the

401k plan.

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 (9-02)

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Company's

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#### 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. Transaction Code (Instr. 8)	5. Number or Derivat Securities Acquired (A) or Disposed (D) (Instr. 3, 4 and 5)	ve Expiration I (Month/Day	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Secur (Instr. 3 and 4)	
				Code V	(A) (D	Date Exercis	Expiration Date	Title	Am or Nu of Sha	
Nonqualified employee stock options (right to buy)	\$ 38.6	01/19/2018		M <u>(1)</u>	4,00	00 02/23/201	1 <sup>(3)</sup> 02/23/20	)20 Commor Stock	<sup>1</sup> 4,	

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

FLETCHER JEREMY ADAM 233 S. PATTERSON AVE SPRINGFIELD, MO 65802

**SVP OF** FINANCE/CONTROLLER

### **Signatures**

/s/ Jeremy A.

Fletcher 01/22/2018 \*\*Signature of Date Reporting Person

## **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 transactions reported on this Form 4 were made pursuant to a 10b5-1 trading plan adopted on November 13, 2017.
- (2) Total includes 369 shares held under the Company's Employee Stock Purchase Plan and 531 shares held directly by Mr. Fletcher.
- (3) The options vest in four equal annual installments beginning on this date.

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.

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