## Edgar Filing: CHENAULT KENNETH I - Form 4

CHENAULT	KENNETH I									
Form 4										
December 14,	, 2017									
<b>FORM</b>	4								PPROVAL	
	UNITEDS		RITIES A			NGE (	COMMISSION	OMB Number:	3235-0287	
Check this if no longe						Expires:	January 31, 2005 average			
subject to		GES IN BENEFICIAL OWN				Estimated a				
Section 16	n 16.			ITIES				burden hou	0	
Form 4 or Form 5							response	0.5		
obligations	- ^	uant to Section								
may contin			•	•	• •		f 1935 or Sectio	on		
See Instruc	ction	30(h) of the I	nvestment	Company	y Act	of 19	40			
1(b).										
(Print or Type Re	esponses)									
(	<b>F</b> )									
1. Name and Address of Reporting Person *2. IssueCHENAULT KENNETH ISymbol			er Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer				
	TER & GAMBLE Co [PG]									
			3. Date of Earliest Transaction				(Check all applicable)			
(Last)	(1131) (141	,		uisaction			X Director	10%	Owner	
			Month/Day/Year) 2/12/2017			Officer (give title Other (specify				
			52017				below) below)			
			endment, Dat	endment, Date Original			6. Individual or Joint/Group Filing(Check			
			Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
NEW YORK	, NY 10285						_X_ Form filed by Form filed by I Person	1 0		
(City)	(State) (2	Zip) Tal				···· · · ·	· . 1 D' 1	6 D 6		
•		12				ues Ac	quired, Disposed o		-	
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i	3. F Transporti	4. Securi			5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect	
(Instr. 3)	(Wollin/Day/Tear)	any		TransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			Beneficially	(D) or Indirect (I)	Beneficial	
(11011-0)		(Month/Day/Year							Ownership	
							Following	(Instr. 4)	(Instr. 4)	
					(A)		Reported Transaction(s)			
					or		(Instr. 3 and 4)			
C			Code V	Amount	(D)	Price	,			
Common Stock	12/12/2017		А	307	А	\$ 0 (1)	34,624.739 (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)

		Edgar	Filing: CHENA	ULIKE	NNETH	I - Form 4				
1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transacti	5. orNumber	6. Date Exerce Expiration Date		7. Title and Amount of	8. Price of Derivative	ç
Security	or Exercise	(infolial) Duy( four)	any	Code	of	(Month/Day/		Underlying	Security	Ś
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securities	(Instr. 5)	I
	Derivative				Securities			(Instr. 3 and 4)		(
	Security				Acquired					ł
					(A) or Disposed					t T
					of (D)					(
					(Instr. 3,					
					4, and 5)					
				Code V	(A) (D)	Date	Expiration	Title Amount		
						Exercisable	Date	or		
								Number		
								of		

## Edgar Eiling: CHENALILT KENNETH L. Form A

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
I O	Director	10% Owner	Officer	Other				
CHENAULT KENNETH I								
200 VESEY STREET	Х							
NEW YORK, NY 10285								
Signatures								
/s/ Robert B. White, attorney-in Chenault	12/14/2017							
<u>**</u> Signature of Reporting I	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) Restricted Stock Units awarded pursuant to issuer's 2014 Stock and Incentive Compensation Plan.
- (2) Total includes grant of dividend equivalents in the form of Restricted Stock Units.

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.

9. Nt

Deriv

Secu

Bene Own Follo Repo Trans (Insti

Shares