PPL Corp Form 4 January 25, 2017

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB APPROVAL

Number: 3235-0287

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if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box

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

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person ** Raphael Joanne H |            |          | 2. Issuer Name <b>and</b> Ticker or Trading Symbol PPL Corp [PPL] | 5. Relationship of Reporting Person(s) to Issuer  (Check all applicable) |  |  |
|---|------------|----------|---|--|--|--|
| (Last)  | (First)    | (Middle) | 3. Date of Earliest Transaction                                   | (Check an applicable)  |  |  |
|   |            |          | (Month/Day/Year)  | Director 10% Owner   |  |  |
| TWO NORTH NINTH STREET                                      |            |          | 01/23/2017  | _X_ Officer (give title Other (specify below)                            |  |  |
|   |            |          |   | SVP, GC & Corp Sec   |  |  |
| (Street)  |            |          | 4. If Amendment, Date Original                                    | 6. Individual or Joint/Group Filing(Check                                |  |  |
|   |            |          | Filed(Month/Day/Year)   | Applicable Line) _X_ Form filed by One Reporting Person                  |  |  |
| ATTENTO   | TAT DA 101 | 101      |   | Form filed by More than One Reporting                                    |  |  |

Person

#### ALLENTOWN, PA 18101

| (City)                               | (State)                                 | (Zip) Tab   | le I - Non-l                           | Derivative                             | Secu   | rities Acq     | quired, Disposed   | of, or Benefic   | ially Owned  |
|--------------------------------------|---|---|--|--|--------|----------------|--|--|--|
| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transactio<br>Code<br>(Instr. 8) | 4. Securi<br>or(A) or Di<br>(Instr. 3, | ispose | d of (D)       | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4)    |
| Common<br>Stock                      | 01/23/2017                              |   | Code V M                               | Amount 8,625                           | (D)    | Price \$ 34.36 | 25,424   | D  |  |
| Common<br>Stock                      | 01/23/2017                              |   | F(1)                                   | 2,891                                  | D      | \$<br>34.36    | 22,533   | D  |  |
| Common<br>Stock                      | 01/24/2017                              |   | S(2)                                   | 5,734                                  | D      | \$<br>34.36    | 16,799   | D  |  |
| Common<br>Stock                      |   |   |  |  |        |                | 1,429.967 (3)  | Ι  | Held in trust<br>pursuant to<br>the<br>Employee<br>Stock |

Ownership Plan.

(9-02)

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

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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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) |                    | Underlying Securities (Instr. 3 and 4) |  | 8. Pric<br>Deriva<br>Securi<br>(Instr. |
|---|---|--------------------------------------|---|--|--|--|--------------------|--|--|--|
|   |   |                                      |   | Code V                                 | (A) (D)  | Date<br>Exercisable                                      | Expiration<br>Date | Title                                  | Amount<br>or<br>Number<br>of<br>Shares |  |
| Stock<br>Unit<br>(ICPKE)                            | \$ 0  | 01/23/2017                           |   | M                                      | 8,625  | <u>(4)</u>   | <u>(4)</u>         | Common<br>Stock                        | 8,625                                  | \$                                     |

## **Reporting Owners**

| Reporting Owner Name / Address | Relationships |
|--------------------------------|---------------|
|                                |               |

10% Owner Director Officer Other

Raphael Joanne H TWO NORTH NINTH STREET

ALLENTOWN, PA 18101

SVP, GC & Corp Sec

#### **Signatures**

/s/Frederick C. Paine, as Attorney-In-Fact for Joanne H. 01/25/2017 Raphael

> \*\*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).
- Shares withheld by the company at the request of the executive officer to pay taxes due following expiration of the applicable restriction **(1)** period, under the terms of the Incentive Compensation Plan for Key Employees (ICPKE).
- (2) Represents the sale of 5,734 shares of common stock pursuant to a 10b5-1 plan, dated April 29, 2016.

Reporting Owners 2

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- (3) Total includes the reinvestment of dividends.
- (4) The units vested on January 23, 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.