## Edgar Filing: Owens Corning - Form 4

Owens Corni Form 4 April 06, 201	C											
FORM	1 4									PROVAL		
<b>CONIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box if no longer				IGES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: January 31 2005 Estimated average burden hours per				
Form 4 or	r									0.5		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations May continue. See Instruction 1(c). Form 5 obligations May continue. See Instruction 1(c). Form 5 obligations May continue. See Instruction 1(c). Form 5 See Instruction 1(c). Form 5 See Instruction 1(c). See Instruction 1(c). 1(c). 1(c). 1(c). 1(c).												
(Print or Type F	Responses)											
SMITH DANIEL T Symbol								5. Relationship of Reporting Person(s) to Issuer				
			wens Corning [OC]					(Check all applicable)				
				below)					e title 10% Owner below) rganization & Adm.			
(Street) 4. If Ame			If Amer	nendment, Date Original				6. Individual or Joint/Group Filing(Check				
				onth/Day/Year)				Applicable Line)				
TOLEDO, O	DH 43659							_X_ Form filed by 0 Form filed by M Person	One Reporting Pe Iore than One Re			
(City)	(State) (	Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ate, if	Code	4. Securiti on(A) or Dis (D) (Instr. 3, 4	and 5 (A) or	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
\$.01 Par Value Common	04/04/2016			Code V A	Amount 76.528 (1)	(D) A	Price \$ 0		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)

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SMITH DANIEL T ONE OWENS CORNING PARKWAY TOLEDO, OH 43659			Sr. VP Organization & Adm.				
Signatures							
Raj B. Dave by POA filed 02/04/2014	04/06/	2016					

<u>\*\*</u>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).

(1) Additional shares reflect the reinvestment of dividends or dividend equivalents.

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.