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DUPONT E I DE NEMOURS & CO

Form 4 June 02, 2015

FORM 4

OMB APPROVAL

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

OMB Number:

5. Relationship of Reporting Person(s) to

3235-0287

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Expires: January 31, 2005

subject to Section 16. Form 4 or Form 5 SECURITIES

Estimated average burden hours per response... 0.5

Form 5 obligations may continue. *See* Instruction

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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

| JULIBER LOIS D | | | Symbol DUPONT E I DE NEMOURS & CO [DD] | | | |] | Issuer (Check all applicable) | | |
|--------------------------------------|--|------------------------|---|--|---|--------|--|---|--|---|
| (Last) 1007 MAR | (First) | (Middle) D-9000 | 3. Date of Earliest Transaction (Month/Day/Year) 05/31/2015 | | | | _X_ Director 10% Owner Officer (give title Other (specify below) | | | |
| | (Street) | | | nendment, I onth/Day/Ye | Oate Original ar) | | 1 | 6. Individual or Joir Applicable Line) _X_ Form filed by On | e Reporting Per | son |
| WILMING | TON, DE 19898 | | | | | | Ī | Form filed by Mo Person | re than One Rep | oorting |
| (City) | (State) | (Zip) | Tal | ble I - Non- | Derivative Se | curiti | es Acqu | ired, Disposed of, | or Beneficiall | y Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) 05/31/2015 | EXECUTION ANY (Month/D | Date, if | 3. Transactic Code (Instr. 8) | 4. Securities our Disposed (Instr. 3, 4 and Amount 220.0394 | of (D) | Price \$ | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 63,854.5567 | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Stock | 03/31/2013 | | | A | 220.0394 | A | 71.01 | <u>(1)</u> | D | |
| Common Stock | | | | | | | | 600 | I | Owned by husband |

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.

SEC 1474

(9-02)

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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 2. 3. Transaction Date 3A. Deemed 4. 5. 6. Date Exercisable and 7. Title and | 8. Price of | 9. Nu |
|---|-------------|--------|
| Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date Amount of | Derivative | Deriv |
| Security or Exercise any Code of (Month/Day/Year) Underlying | Security | Secui |
| (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Derivative Securities | (Instr. 5) | Bene |
| Derivative Securities (Instr. 3 and 4 |) | Own |
| Security Acquired | | Follo |
| (A) or | | Repo |
| Disposed | | Trans |
| of (D) | | (Instr |
| (Instr. 3, | | |
| 4, and 5) | | |
| Amour | nt . | |
| or | | |
| Date Expiration Title Number | r | |
| Exercisable Date of | 1 | |
| Code V (A) (D) Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| JULIBER LOIS D 1007 MARKET STREET D-9000 WILMINGTON, DE 19898 | X | | | | | |

Signatures

Erik T. Hoover by Power of Attorney 06/02/2015

**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) Includes direct ownership, unvested RSUs and vested deferred 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.

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