### Edgar Filing: PPG INDUSTRIES INC - Form 4

| PPG INDUSTRI                                                                                                                                          | ES INC                             |                                                                                                                                                                                                                                                                                                 |                                 |                             |                                                                                   |                                          |                                                                                                        |                                                                      |                                                                   |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------|-----------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------|--|--|
| Form 4                                                                                                                                                |                                    |                                                                                                                                                                                                                                                                                                 |                                 |                             |                                                                                   |                                          |                                                                                                        |                                                                      |                                                                   |  |  |
| May 04, 2016                                                                                                                                          |                                    |                                                                                                                                                                                                                                                                                                 |                                 |                             |                                                                                   |                                          |                                                                                                        |                                                                      | PPROVAL                                                           |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington D C 20549                                                                          |                                    |                                                                                                                                                                                                                                                                                                 |                                 |                             |                                                                                   |                                          |                                                                                                        |                                                                      | 3235-0287                                                         |  |  |
| Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br>may continue.<br><i>See</i> Instruction<br>1(b). | STATEM<br>Filed pur<br>Section 17( | Washington, D.C. 20549<br>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |                                 |                             |                                                                                   |                                          |                                                                                                        |                                                                      |                                                                   |  |  |
| (Print or Type Respo                                                                                                                                  | onses)                             |                                                                                                                                                                                                                                                                                                 |                                 |                             |                                                                                   |                                          |                                                                                                        |                                                                      |                                                                   |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>HAYNES VICTORIA F                                                                                 |                                    |                                                                                                                                                                                                                                                                                                 | Symbol                          | er Name <b>an</b><br>IDUSTR |                                                                                   | C                                        | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                          |                                                                      |                                                                   |  |  |
| (Last)                                                                                                                                                | (First) (1                         | Middle)                                                                                                                                                                                                                                                                                         | 3. Date of Earliest Transaction |                             |                                                                                   |                                          | (Check an applicable)                                                                                  |                                                                      |                                                                   |  |  |
| PPG INDUSTR<br>PLACE                                                                                                                                  | (Month/Day/Year)<br>03/11/2016     |                                                                                                                                                                                                                                                                                                 |                                 |                             | X_ Director    10% Owner      Officer (give title below)    Other (specify below) |                                          |                                                                                                        |                                                                      |                                                                   |  |  |
|                                                                                                                                                       | (Street)                           | 4. If Amendment, Date Original Filed(Month/Day/Year)                                                                                                                                                                                                                                            |                                 |                             |                                                                                   | 1                                        | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_Form filed by One Reporting Person |                                                                      |                                                                   |  |  |
| PITTSBURGH,                                                                                                                                           | PA 15272                           |                                                                                                                                                                                                                                                                                                 |                                 |                             |                                                                                   |                                          | Person                                                                                                 | More than One R                                                      | eporting                                                          |  |  |
| (City)                                                                                                                                                | (State)                            | (Zip)                                                                                                                                                                                                                                                                                           | Tab                             | ole I - Non-                | Derivative                                                                        | Securities A                             | cquired, Disposed o                                                                                    | of, or Beneficia                                                     | lly Owned                                                         |  |  |
|                                                                                                                                                       | ansaction Date<br>nth/Day/Year)    | 2A. Deemo<br>Execution<br>any<br>(Month/Da                                                                                                                                                                                                                                                      | Date, if                        | Code<br>(Instr. 8)          | 4. Securit<br>onAcquired<br>Disposed<br>(Instr. 3, 4)                             | (A) or<br>of (D)                         | Securities<br>Beneficially<br>Owned                                                                    | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Reminder: Report or                                                                                                                                   | n a separate line                  | for each cla                                                                                                                                                                                                                                                                                    | ass of sec                      | urities bene                | ficially ow                                                                       | ned directly                             | or indirectly.                                                                                         |                                                                      |                                                                   |  |  |
|                                                                                                                                                       |                                    |                                                                                                                                                                                                                                                                                                 |                                 |                             | inforn<br>requi                                                                   | nation cont<br>ed to resp<br>lys a curre | spond to the collect<br>ained in this form<br>ond unless the for<br>ntly valid OMB con                 | are not<br>m                                                         | SEC 1474<br>(9-02)                                                |  |  |

# 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. Number of | 6. Date Exercisable and | 7. Title and Amount of |
|-------------|-------------|---------------------|--------------------|-----------|--------------|-------------------------|------------------------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transacti | orDerivative | Expiration Date         | Underlying Securities  |
| Security    | or Exercise |                     | any                | Code      | Securities   | (Month/Day/Year)        | (Instr. 3 and 4)       |

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| (Instr. 3)                | Price of<br>Derivative<br>Security |            | (Month/Day/Year) | (Instr. 8 | 8) | Acquired (A)<br>Disposed of<br>(Instr. 3, 4, a<br>5) | (D) |                     |                    |                 |                                  |
|---------------------------|------------------------------------|------------|------------------|-----------|----|------------------------------------------------------|-----|---------------------|--------------------|-----------------|----------------------------------|
|                           |                                    |            |                  | Code      | v  | (A)                                                  | (D) | Date<br>Exercisable | Expiration<br>Date | Title           | Amount or<br>Number of<br>Shares |
| Phantom<br>Stock<br>Units | <u>(1)</u>                         | 03/11/2016 |                  | А         |    | 130.3988<br>(2)                                      |     | (3)                 | (3)                | Common<br>Stock | 130.3988<br>(2)                  |

### **Reporting Owners**

| Reporting Owner Name / Address                                                     | Relationships |           |         |       |  |  |  |  |
|------------------------------------------------------------------------------------|---------------|-----------|---------|-------|--|--|--|--|
| 1                                                                                  | Director      | 10% Owner | Officer | Other |  |  |  |  |
| HAYNES VICTORIA F<br>PPG INDUSTRIES, INC.<br>ONE PPG PLACE<br>PITTSBURGH, PA 15272 | Х             |           |         |       |  |  |  |  |
| Signatures                                                                         |               |           |         |       |  |  |  |  |

/s/ Greg E. Gordon, Attorney-in-Fact for Victoria F. Haynes

\*\*Signature of Reporting Person

Date

05/04/2016

## **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 security converts to common stock on a one-for-one basis.
- (2) This form reflects shares that were acquired through automatic dividend reinvestment on March 11, 2016. These shares were also omitted from the reporting person's Form 4 dated 4/20/2016.
- (3) After termination of service as a Director of PPG Industries, Inc.
- (4) Total of all phantom stock units held by the reporting person in the PPG Industries, Inc. Deferred Compensation Plan for Directors.

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.