Edgar Filing: MOHAWK INDUSTRIES INC - Form 4

MOHAWK INDUSTRIES INC Form 4 March 04, 2016 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction See Instruction See Instruction See Instruction See Instruction See Instruction See Instruction MOHAWK INDUSTRIES INC MOHAWK INDUSTRIES INC SECURITIES SECURITIES SECURITIES MOHAWK INDUSTRIES INC SECURITIES SECURITIES MOHAWK INDUSTRIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURITIES SECURI							OMB Number: Expires: Estimated a burden hour response	•		
1(b).	Responses)									
(Print or Type Responses) 1. Name and Address of Reporting Person <u>*</u> Boykin Frank H							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 160 SOUTH INDUSTRIAL BLVD., P.O. BOX 12069			3. Date of Earliest Transaction (Month/Day/Year) 03/04/2016				Director _X Officer (give t pelow)			
			Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)	(State)	(Zip)	T - 1		G		Person	D		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem	ed Date, if	3. 4. Securi Transactionor Dispo Code (Instr. 3, (Instr. 8)	ties Acq sed of (I 4 and 5) (A) or (D)	uired (A) D) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	y Owned 7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/04/2016			S 3,128	$D = \frac{\$}{1}$	\$ 188.1737	35,510	D		
Common Stock							155	I	by Managed Account	

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 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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						
Troporting of the Linne (Director	10% Owner	Officer	Other				
Boykin Frank H 160 SOUTH INDUSTRIA P.O. BOX 12069 CALHOUN, GA 30703	L BLVD.			CFO				
Signatures								
FRANK H. BOYKIN	03/04/20	16						
**Signature of	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).

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.

Reporting Person