Edgar Filing: Niemann Jennifer C - Form 4

Niemann J Form 4								
October 19	Л Л						PPROVAL	
	UNITED	STATES SH	ECURITIES A Washington,	OMB Number:	3235-0287			
if no lo subject Section Form ² Form 5 obligat may co <i>See</i> Ins	tto STATER n 16. 4 or 5 Filed pu	rsuant to Sec (a) of the Pub	tion 16(a) of the Investment	Expires: Estimated a burden hou response	urs per			
1(b). (Print or Typ	e Responses)							
 Name and Address of Reporting Person <u>*</u> Niemann Jennifer C 			mbol	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) STEELCASE INC., 901 44TH ST SE			Date of Earliest Tr Ionth/Day/Year))/18/2018		(Check all applicable) <u>X</u> Director Officer (give title below) <u>Director</u> <u>Director</u> <u>below</u>) <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u></u>			
(Street) GRAND RAPIDS, MI 49508			If Amendment, Da led(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 			
					Person			
(City) 1.Title of Security (Instr. 3)	(State) 2. Transaction Date (Month/Day/Year)	(Zip) 2A. Deemed Execution Dat any (Month/Day/Y	3. te, if Transaction Code	Anount (D) Price	5. Amount of Securities F Beneficially (Owned (7. Nature of Indirect	
Reminder: R	eport on a separate line	e for each class	of securities benef	information cont required to respo	or indirectly. pond to the collec ained in this form ond unless the for ntly valid OMB con	are not m	SEC 1474 (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	1
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onDerivative	Expiration Date	Underlying Securities]
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	;

number.

E E E E

Edgar Filing: Niemann Jennifer C - Form 4

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired Disposed (Instr. 3, 5)	l of (D)				(
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Class B Common Stock	<u>(1)</u>	10/18/2018		G	V		1,710	(2)	(3)	Class A Common Stock	1,710
Class B Common Stock	<u>(1)</u>	10/18/2018		G	V		1,710	(2)	(3)	Class A Common Stock	1,710
Class B Common Stock	<u>(1)</u>	10/18/2018		G	V	3,420		(2)	(3)	Class A Common Stock	3,420
Class B Common Stock	<u>(1)</u>							(2)	(3)	Class A Common Stock	68,378

Reporting Owners

Reporting Owner Name / Address	Relationships						
L O	Director	10% Owner	Officer Othe				
Niemann Jennifer C STEELCASE INC. 901 44TH ST SE GRAND RAPIDS, MI 49508	Х						
Signatures							
Liesl A. Maloney, by power of		10/19/2	2018				

attorney

**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) Shares of Class B Common Stock are convertible into shares of Class A Common Stock on a 1-for-1 basis.
- (2) Immediately convertible.
- (3) Not applicable.
- Represents shares held by trusts for the benefit of Ms. Niemann's family members, of which trusts Ms. Niemann's spouse serves as (4) trustee.

(5) Represents shares held by trusts for the benefit of Ms. Niemann's family members, of which trusts Ms. Niemann serves as trustee.

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 Owners