Edgar Filing: DUKE DWIGHT B - Form 4

DUKE DWIC	GHT B										
Form 4											
May 22, 2018	;										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB	0005 0007			
			Wasł	nington,	D.C. 205	549			Number:	3235-0287	
	Check this box					Expires:	January 31,				
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNE					NERSHIP OF	•	2005				
Section 16).	SECURITIES						Estimated average burden hours per			
Form 4 or									response	•	
Form 5	Filed pu	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									
obligation may contin		7(a) of the	Public Uti	lity Hold	ling Com	pany	Act of	f 1935 or Sectio	n		
See Instruc		30(h)	of the Inv	estment	Company	y Act	of 194	40			
1(b).											
(Print or Type R	esponses)										
1		D *						5 D L () L)			
1. Name and Address of Reporting Person <u>*</u> DUKE DWIGHT B			2. Issuer Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer			
DUKEDWI	JIII D		Symbol	DIDUG				155001			
			DYCOM	INDUS	TRIES II	NC [I	JY]	(Chec	ck all applicable	:)	
(Last)	(First)	(Middle)	3. Date of I	Earliest Tr	ansaction						
			(Month/Da	-				_X_ Director		Owner	
11780 U.S. HIGHWAY 1, SUITE			05/22/2018					Officer (give title Other (specify below) below)			
600									0010(1)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
								X Form filed by			
PALM BEA								Form filed by M Person	Nore than One Re	porung	
GARDENS,	FL 33408										
(City)	(State)	(Zip)	Table	I - Non-D	erivative S	Securit	ties Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of	2. Transaction D	Date 24 De		3.	4. Secur			5. Amount of	6. Ownership	•	
Security	(Month/Day/Yes	TransactionAcquired (A) or				Securities	Form: Direct				
(Instr. 3)	× •	any	Code Disposed of (D)					Beneficially	(D) or	Beneficial	
		(Month/D			Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				Indirect (I) Owners		
								Following Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
					7	or	р.	(Instr. 3 and 4)			
Destricted				Code V	Amount	(D)	Price				
Restricted Stock Units	05/22/2018			٨	1,586	٨	\$0	21 101	D		
(1)	0312212018			А	(2)	А	(3)	21,181	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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	dress							
	Director	10% Owner	Officer	Other				
DUKE DWIGHT B 11780 U.S. HIGHWAY 1 SUITE 600 PALM BEACH GARDENS, FL 33408	Х							
Signatures								
Richard B. Vilsoet, Attorney-in-Fact for Duke	05/22/2018							
**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) Each restricted stock unit represents a contingent right to acquire one (1) share of Dycom Industries, Inc. common stock, par value \$0.33 1/3 per share.
- (2) The restricted stock units vest in three substantially equal annual installments on May 21, 2019, May 19, 2020 and May 25, 2021.
- (3) No consideration was paid for the restricted 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.