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Form 4										
Check this box if no longer subject to Section 16. SECURITIES							OMB APPROVAL OMB 3235-0287 Number: January 31 Expires: January 31 2005 Estimated average burden hours per response 0.5			
(Print or Type F	Responses)									
McKay Robert A Symbol			r Name and Ticker or Trading prica CORP [PMC]				5. Relationship of Reporting Person(s) to Issuer			
			f Earliest Transaction Day/Year)				(Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) <u></u> below) SVP Purchasing,Trade Relations			
	(Street)			ndment, Dat th/Day/Year)	-			6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M	One Reporting Pe	rson
(City)	(State)	(Zip)						Person		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	ate 2A. Dee r) Executio any		3. Transactio Code (Instr. 8)	4. Securiti	(A) or	quired of (D)	uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of
Common Stock, \$0.01 par value	11/09/2017			Code V	Amount 22,730	(D) A	Price \$ 0	109,033	D	
Common Stock, \$0.01 par value	11/17/2017			F	19,719	D	\$ 29.1	89,314	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	;	Date	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
r o	Director	10% Owner	Officer	Other				
McKay Robert A 1901 CAMPUS PLACE LOUISVILLE, KY 40299			SVP Purchasing, Trade Relations					
Signatures								
Berard Tomassetti, Attorney-in-Fact		11/21/2017						
**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).

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.