Edgar Filing: ESTES TIMOTHY R - Form 4

ESTES TIMO Form 4	THY R									
March 27, 201	18									
FORM	Л							OMB A	PPROVAL	
	UNITED	STATES			ND EXC D.C. 2054		COMMISSION	OMB Number:	3235-0287	
Check this if no longe	r							Expires:	January 31, 2005	
subject to Section 16 Form 4 or	st to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES				NERSHIP OF	Estimated average burden hours per				
Form 5 obligations may contin <i>See</i> Instruc 1(b).	Section 17	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								
(Print or Type Re	esponses)									
1. Name and Address of Reporting Person <u>*</u> ESTES TIMOTHY R			2. Issuer Name and Ticker or Trading Symbol DYCOM INDUSTRIES INC [DY]			5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle)		e of Earliest Transaction			(Check all applicable)			
(Last) (First) (Middle) 11780 U.S. HIGHWAY 1, SUITE 600 (Street)			(Month/Day/Year) 03/26/2018				Director 10% Owner X Officer (give title Other (specify below) Executive VP & COO 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
			4. If Amendment, Date Original Filed(Month/Day/Year)							
PALM BEAC GARDENS, I							Form filed by M Person			
(City)	(State)	(Zip)	Table	I - Non-De	erivative Se	ecurities Acq	uired, Disposed of	, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execut any	eemed ion Date, if n/Day/Year)	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4)	(A) or of (D) 4 and 5) (A) or	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	

Restricted Stock Units 03/26/2018

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.

D

240,088

\$ 0 (3)

A

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

2,633

(2)

А

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed or (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee stock option (right to buy)	\$ 106.19	03/26/2018		A	10,776	<u>(4)</u>	03/26/2028	Common Stock	10,776

Reporting Owners

Reporting Owner Name / Address	Relationships						
r g -	Director	10% Owner	Officer	Other			
ESTES TIMOTHY R 11780 U.S. HIGHWAY 1 SUITE 600 PALM BEACH GARDENS, FL 33408			Executive VP & COO				
Signatures							
Richard B. Vilsoet, Attorney-in-fact for Estes	03/27/2018						
**Signature of Reporting Person			Date				
Evolution of Poopon	0001						

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 share of DY common stock, par value \$0.33 1/3 per share.
- (2) The restricted stock units vest in four substantially equal annual installments beginning March 30, 2019.
- (3) No consideration was paid for the restricted stock units.
- (4) The options vest in four substantially equal annual installments beginning on March 26, 2019.
- (5) No consideration was paid for the derivative security.

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.