Edgar Filing: Garland Michael M. - Form 4

Garland Micl Form 4	hael M.										
March 19, 20)19										
FORM		TATES	SECUD	ITIES A	ND EVC	• T T A N	NCEC	OMMISSION	-	PPROVAL	
	UNITED	SIAIES			ND EXC D.C. 205		NGE C	UMINII55IUN	OMB Number:	3235-0287	
Form 4 or					ITIES				Expires: Estimated a burden hou response	•	
obligation may conti <i>See</i> Instru 1(b).	inue. Section 17(a	a) of the P	ublic Uti	ility Hold		pany	Act of	e Act of 1934, 1935 or Section 0	n		
(Print or Type R	Responses)										
Garland Michael M. Symbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
					roup Inc.	[PEC	١١	(Check all applicable)			
(Last)(First)(Middle)3. Date of (Month/D)1088 SANSOME STREET03/15/20								X Director 10% Owner X Officer (give title Other (specify below) below) Director, President and CEO			
				ndment, Date Original th/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)		(Zip)	Table	I Non D	omizzativa S	aanni	tios A og	Person	or Donoficial	ly Oumod	
1.Title of Security (Instr. 3)	1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if			a. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Class A Common Stock	03/15/2019			D	25,008 (1)	D	\$0	266,174	D		
Class A Common Stock	03/15/2019			F	10,670 (2)	D	\$ 21.7	255,504	D		
Class A Common Stock								100,000	Ι	See footnote (3)	

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)

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			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	int of rlying ities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Garland Michael M. 1088 SANSOME STREET SAN FRANCISCO, CA 94111	Х		Director, President and CEO				
Signatures							
/s/ Kim H. Liou,	03	/19/2019					

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).

Represents shares forfeited from performance based shares granted on March 15, 2016 (the "2016 TSR Award") that were eligible to vest based on certain financial performance objectives. Upon grant, the maximum vesting amount was reported in Table 1 of Form 4 filed

- (1) March 17, 2016. On March 15, 2019, the Company determined that based on the Company's performance over the applicable performance period, 28,580 shares would vest and 25,008 shares would be forfeited.
- (2) Represents shares withheld for satisfaction of tax withholding obligation arising as a result of the vesting of the 2016 TSR Award. See footnote 1.
- (3) By the Garland/Coe Revocable Trust dated May 29, 2008, of which the reporting person is a trustee and beneficiary.

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.

Attorney-in-fact

**Signature of Reporting Person