Edgar Filing: FORD MOTOR CO - Form 4

FORD MOT	OR CO										
Form 4											
May 26, 201	5										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
UNITED STATES SECURITIES AND EACHANGE COMMISSION								ONID	3235-0287		
Check thi	s box		Was	shington,	D.C. 205	49			Number:		
if no longer									Expires:	January 31, 2005	
subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNE				NERSHIP OF	Estimated a		
Section 1				SECURITIES					burden hours per		
Form 4 or Form 5			0 1	$(\cdot) \cdot f \cdot f \cdot f$	G	F -	1	· A - + - £ 1024	response	0.5	
obligation	1 0						•	e Act of 1934,			
may cont	inue. Section 1			•	.			f 1935 or Sectio	n		
See Instru	iction	50(II)	of the m	vestment	Company	Act	01 194	+0			
1(b).											
(Print or Type F	Responses)										
J1	r										
1. Name and Address of Reporting Person [*] _2. Issuer Name and Ticker or Trading 5. Relationship of 5.							Reporting Per	Reporting Person(s) to			
THORNTON JOHN L Symbo								Issuer			
			-	MOTOR O	CO [F]						
(Last)	(First)	(Middle)						(Chec	k all applicable	e)	
				. Date of Earliest Transaction Month/Day/Year)				X Director 10% Owner			
				05/21/2015				Officer (give title Other (specify below)			
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mor	th/Day/Year)				Applicable Line)	0 D (D		
	NI NII 40106							_X_ Form filed by (Form filed by N	Jne Reporting Pe Iore than One Re		
DEARBOR	N, MI 48126							Person		1 0	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecurit	ties Acq	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction D			3.				5. Amount of	6. Ownership		
Security	(Month/Day/Yea	· ·	on Date, if	Transaction(A) or Disposed of			Securities	Form: Direct	Indirect Beneficial		
(Instr. 3) any (Month/			Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Beneficially Owned	(D) or Indirect (I)	Ownership	
	~)	Following					(Instr. 4)	(Instr. 4)			
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(IIIsu: 5 aliu 4)			
Common											
Stock,	05/21/2015			A <u>(1)</u>	16,118	А	<u>(1)</u>	69,190	D		
\$0.01 par					10,110						
value											

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
THORNTON JOHN L ONE AMERICAN ROAD DEARBORN, MI 48126	Х						
Signatures							
Jerome F. Zaremba, Attorney-in-Fact	05/26/2015						
**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) These shares were acquired under the Company's 2014 Stock Plan for Non-Employee Directors, without payment by me.

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.