### Edgar Filing: LELAND D MARK - Form 4

LELAND I	O MARK						
Form 4							
May 10, 20	18						
FORM	ЛД				OMB APPROVAL		
	UNITED		RITIES AND EXCHANGE CO	0	MB 3235-0287		
Check t	his box	W	ashington, D.C. 20549	N	umber:		
if no lo	nger	MENT OF CITA		E:	xpires: January 31, 2005		
subject	10	VIENI OF CHA	NGES IN BENEFICIAL OWNE SECURITIES	KSHIP OF E	stimated average		
Section Form 4				burden hours per			
Form 5		report to Section	16(a) of the Securities Exchange A		esponse 0.5		
obligati	ons Section 17		Utility Holding Company Act of 19				
may con	nunue.		Investment Company Act of 1940	55 of Beetion			
<i>See</i> Inst 1(b).	ruction						
1(0).							
(Print or Type	Responses)						
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationshi					Reporting Person(s) to		
LELAND D MARK Symbol			bol Issuer				
		POTL	ATCHDELTIC CORP [PCH]	(Check all	applicable)		
(Last)	(First)	(Middle) 3. Date	of Earliest Transaction	(Check an	applicable)		
		(Month	/Day/Year)	X Director	10% Owner		
601 WEST FIRST 05/09/2		2018	Officer (give title ow)	Other (specify below)			
AVENUE,	SUITE 1600						
	(Street)	4. If Ar	nendment, Date Original 6.	Individual or Joint/0	Group Filing(Check		
		Filed(M		plicable Line)			
CDOULNU	- With 00001			_ Form filed by One F _ Form filed by More			
SPOKANE	E, WA 99201			son	and one reporting		
(City)	(State)	(Zip) Ta	ble I - Non-Derivative Securities Acquir	ed, Disposed of, or	Beneficially Owned		
1.Title of	2. Transaction Date		3. 4. Securities Acquired (A)		5. 7. Nature of		
Security	(Month/Day/Year)	Execution Date, if	Transaction Disposed of (D)		Ownership Indirect		
(Instr. 3)		any	Code (Instr. 3, 4 and 5)		Form: Beneficial		
		(Month/Day/Year)	(Instr. 8)		Direct (D) Ownership or Indirect (Instr. 4)		
				-	I)		
			(A)	Transaction(s) (	Instr. 4)		
			or Code V Amount (D) Price	(Instr. 3 and 4)			
Common	05/00/2019		1 560 874 \$	0 501 074			
Stock	05/09/2018		A $(1)$ A $(48.05)$	9,501.874 I	)		

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. ofNumber 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**

<b>Reporting Owner Name / Address</b>	Relationships					
I B	Director	10% Owner	Officer	Other		
LELAND D MARK 601 WEST FIRST AVENUE SUITE 1600 SPOKANE, WA 99201	Х					
Signatures						
/s/ Lorrie D. Scott, Attorney-in-Fact		05/10/2018				
<u>**</u> 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).

Represents award of restricted stock units (RSUs) that may be settled only for shares of common stock on a one-for-one basis. The RSUs will vest on May 9, 2019, subject to continued membership on the board through such date, except in the case of death, disability or

(1) failure to stand for election at an annual shareholder meeting. During the vesting period, an amount equal to the dividends that would have been paid on the RSUs had they been in the form of common stock will be converted into additional RSUs. The additional RSUs will also vest May 9, 2019.

### **Remarks:** David Mark Leland PotlatchDeltic Corporation

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.