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Johnson Edv	win D										
Form 4	010										
March 14, 20									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
	Check this box							Expires:	January 31,		
if no long subject to Section 1 Form 4 c Form 5	or SIAIE 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									
obligatio may con See Instr 1(b).	tinue. Section 17	(a) of the	Public U		ding Cor	npan	y Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type]	Responses)										
Johnson Edwin D Symbo			Symbol	r Name and LA WAS				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	[CWST										
				of Earliest Transaction Day/Year) 2019				Director 10% Owner X Officer (give title Other (specify below) below) President & COO			
CASELLA INC.	WASTE SYSTE	EMS,						1103			
	(Street) 4. If Amer Filed(Mon				ate Origina r)	ıl		6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
RUTLAND	, VT 05701							Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative	Secu	rities Acqu	uired, Disposed of,	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	OwnershipIndiForm: DirectBen(D) orOwn	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Class A Common Stock	03/12/2019			A <u>(1)</u>	5,074	A	\$ 0	343,099	D		
Class A Common Stock	03/13/2019			S <u>(2)</u>	1,255	D	\$ 34.183 (3)	341,844	D		

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 formSEC 1474
(9-02)

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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 Derivative	tNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Amoun or Title Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
Johnson Edwin D 25 GREENS HILL LANE C/O CASELLA WASTE S RUTLAND, VT 05701				President & COO				
Signatures								
/s/ Edwin D. Johnson	03/14/2019							

Johnson **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 the award of Restricted Stock Units (RSUs) under the Casella Waste Systems, Inc. 2016 Incentive Plan. Each RSU represents (1) a contingent right to receive one share of Casella's Class A Common Stock. RSUs vest in three equal installments beginning on March 12, 2020

Represents the automatic sale of shares of stock for tax withholding purposes pursuant to a Rule 10b5-1 trading plan adopted by the (2) reporting person on March 15, 2016, in connection with the vesting of RSUs on March 12, 2019.

Represents the weighted average sales price for shares sold in multiple transactions, ranging from \$33.95 to \$34.27. Upon request of the staff of the Securities and Exchange Commission, the issuer or a security holder of the issuer, the reporting person will provide full (3) information regarding the number of shares sold at each separate price.

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.