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Skipworth M	lichael										
Form 4	2010										
February 22,											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								COMMISSION	OMB	B APPROVAL 	
Check this box Washington, D.C. 20549								Number:	January 31,		
if no long	er	IENT OI	F CHAN	CFS IN	RENEE	CIA		NEDSHID OF	Expires:	2005	
Section 1	subject to Section 16. Form 4 or					VERSIII OF	Estimated a burden hou response	urs per			
Form 5 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 See Instruction 1(b).											
(Print or Type F	Responses)										
Skipworth Michael Symbol				suer Name and Ticker or Trading ol gstop Inc. [WING]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Middle)	3. Date of Earliest Transaction					(Check all applicable)			
			Day/Year)				Director 10% Owner X_ Officer (give title Other (specify below) below) See Remarks				
(Street) 4. If Ame				endment, Date Original				6. Individual or Joint/Group Filing(Check			
				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
~				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock, par value \$0.01 per share	02/20/2019			М	1,726	A	\$ 0 <u>(1)</u>	4,680	D		
Common Stock, par value \$0.01 per share	02/20/2019			F	476 <u>(2)</u>	D	\$ 66.95	4,204	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (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)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	02/20/2019		М	1,726	(3)	(3)	Common Stock, par value \$0.01 per share	1,726	4

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Skipworth Michael C/O WINGSTOP INC. 5501 LBJ FREEWAY, 5TH FLOOR DALLAS, TX 75240			See Remarks				
Signatures							
/s/ Ryan Clyde, as attorney-in-fact	02/22/20	19					

**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) Restricted stock units ("RSUs") convert into common stock on a one-for-one basis.
- (2) Represents the number of shares withheld for the payment of tax liabilities in connection with the vesting of 1,726 service-based RSUs.
- (3) The RSUs were granted on February 20, 2018 pursuant to the Wingstop Inc. 2015 Omnibus Incentive Compensation Plan. The RSUs vest in three equal annual installments beginning on the first anniversary of the grant date.

Remarks:

Executive Vice President and Chief Financial Officer Exhibit List: Exhibit 24 - Power of Attorney

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.