CRANDALL THEODORE D

Form 4

Common

Stock

11/09/2018

November 13, 2018

FORM	ЛΔ								OMB AF	PPROVAL		
	Washington, D.C. 20549							OMB Number:	3235-0287			
Check the character of	nger		~=~ ~		~~			Expires:	January 31, 2005			
subject t Section Form 4	16.	F CHAN	GES IN E SECURI		CIAI	L OW	NERSHIP OF	Estimated a burden hou response	verage			
Form 5 obligation may consee Institution 1(b).	ons section	7(a) of the		ility Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Section 40	n			
(Print or Type	Responses)											
1. Name and Address of Reporting Person * CRANDALL THEODORE D			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
			ROCKV [ROK]	VELL AU	TOMAT	ION	INC	(Chec	k all applicable)		
(Last) (First) (Middle) 1201 SOUTH SECOND STREET			3. Date of Earliest Transaction (Month/Day/Year)					Director 10% Owner Officer (give title below) Other (specify below)				
1201 300	IH SECOND S	IKEEI	11/09/20)18				Senio	r Vice Presiden	t		
	(Street)		ndment, Dat th/Day/Year)	e Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
MILWAUI	KEE, WI 53204	L							fore than One Re			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)		any		med 3. on Date, if Transaction Code Day/Year) (Instr. 8)		ies (A) o of (D 4 and (A))	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock								53.1096	I	By Savings		

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

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V 390

D

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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.

SEC 1474

(9-02)

84,453.6663

 $D^{(2)}$

Plan (1)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration Date		Amount	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								Λ.	mount		
									mount		
						Date	Expiration Date	Title Number of			
						Exercisable					
				C + V	(A) (D)						
				Code V	(A) (D)			S	hares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

CRANDALL THEODORE D 1201 SOUTH SECOND STREET MILWAUKEE, WI 53204

Senior Vice President

Signatures

Karen A. Balistreri, Attorney-in-Fact for Theodore D. Crandall

11/13/2018

**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).
 - Includes shares represented by Company stock fund units acquired under the Company Savings Plan since the date last reported for this person based on information furnished by the Plan Administrator as of 10/31/2018. The number of stock fund units represented by the
- (1) balance of the participant's Company stock fund account may not exactly equal the number of stock fund units represented by a prior balance due to variance in the proportion of uninvested cash held in the reference fund used to determine unit values of the Company stock fund under the Plan.
- (2) Includes 4,330 shares held by the Company to implement restrictions on transfer unless and until certain conditions are met.

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.

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