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GROTE ROBER Form 4	ТЕ										
November 01, 20	18										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549							N OMB Number:	3235-0287			
Check this box if no longer subject to Section 16.	F CHAN	IGES IN SECUI	Estimated a burden hou	urs per							
Form 4 orresponseCForm 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Sectionsee Instruction30(h) of the Investment Company Act of 1940											
(Print or Type Respo	nses)										
1. Name and Address of Reporting Person <u>*</u> GROTE ROBERT E			2. Issuer Name and Ticker or Trading Symbol Post Holdings, Inc. [POST]			5. Relationship of Reporting Person(s) to Issuer					
(Last) (First) (Middle) 3. Date of Earliest T				ransaction	-	eck all applicable	all applicable)				
C/O POST HOL S. HANLEY RC	(Month/Day/Year) 10/31/2018			X Director 10% Owner Officer (give title Other (specify below) below)							
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 							
ST. LOUIS, MO	63144						Person				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative S	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deem Execution any (Month/D			Date, if TransactionAcquired (A) or Code Disposed of (D)			(A) or of (D) and 5)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V		or (D) Price	Transaction(s) (Instr. 3 and 4)				
Reminder: Report on	a separate line	for each cla	ass of sec	urities bene	-	-	-				
					inform require	ation cont ed to respo ys a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

 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. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Post Holdings, Inc. Stock Equivalents	<u>(1)</u>	10/31/2018		А		100.528		(2)	(2)	Common Stock	100.528

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GROTE ROBERT E C/O POST HOLDINGS, INC. 2503 S. HANLEY ROAD ST. LOUIS, MO 63144	Х						
Signatures							
/s/ Diedre J. Gray, Attorney-in-Fact		11/01/2018					
<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).

Reporting Person's retainers earned as a Director of Issuer are deferred into Post Holdings, Inc. stock equivalents under the Issuer's Deferred Compensation Plan for Non-Management Directors. Reporting Person is credited with stock equivalents as soon as

- (1) Deterred compensation run for Non-Management Directors, Reporting reison is created with stock equivalents as soon as administratively practicable following the month in which such retainer is earned. The value of these stock equivalents is distributed (on a one-for-one basis) in the form of cash upon retirement from the Board of Directors.
- (2) The stock equivalents have no fixed exercisable or expiration dates.

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.