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G&K SERV	ICES INC										
Form 4											
August 29, 2	2016										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITE	DSTATE					NGE C	COMMISSION		3235-0287	
Check th	nis box		was	shington,	D.C. 20	549			Number:	January 31,	
if no lon	oer.	EMENT O	E CHAN	CESINI	DENIE		LOW	NERSHIP OF	Expires:	2005	
subject t	0		F CHAN	SECUR		UIA		NERSHIP OF	Estimated a		
Section Form 4 of				SECUR	111125				burden hours per		
Form 5		oursuant to	Section 1	6(a) of the	- Securit	ies F	xchang	e Act of 1934,	response	0.5	
obligatio	ons Section 1						•	1935 or Section	n		
may con <i>See</i> Instr	unue.) of the In	•	•	· ·			-		
1(b).	uction		·		1	-					
(Print or Type	Responses)										
1 1 1		D *						5 0 1 (* 1 * 6			
				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
	las Joseph		Symbol	K SERVICES INC [GK]							
					-	ТJ		(Chec	k all applicable)	
(Last)	(First)	(Middle)		Earliest Tr	ansaction						
			n/Day/Year)				Director 10% Owner X Officer (give title Other (specify				
<i>3993</i> OI 00			08/25/2	010				below)	below)		
								Vice Pres	ident and Contr	oller	
			4. If Ame	endment, Date Original				6. Individual or Joint/Group Filing(Check			
			lonth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
	NIZA MINI 552	12						_X_ Form filed by 0			
MINNEIO	NKA, MN 553	43						Person		1 0	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	Date 2A. Dee	emed	3.	4. Securi	ties A	cauired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	on Date, if Transaction(A) or Disposed of (D)					Securities	Form: Direct			
(Instr. 3)		any		Code (Instr. 3, 4 and 5)				Beneficially		Beneficial	
		(Month/	Day/Year)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
								Reported	(11341. 1)	(1150.1)	
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Class A							\$				
Common	08/25/2016			F	229 <u>(1)</u>	D	φ 96.99	9,738	D		
Stock							,0.,,				

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)

1. Title o Derivativ Security (Instr. 3)	ve Conversion or Exercise	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. of Derivativ 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 Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Dietz Thomas Joseph 5995 OPUS PARKWAY MINNETONKA, MN 55343			Vice President and Controller				
Signatures							
/s/ Jeffrey L. Cotter, Attorney-in-Fact		08/29/201	6				
**Signature of Reporting Person		Date					

**Signature of Reporting Person

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).

On August 25, 2016, an aggregate of 681 restricted shares previously issued to Mr. Dietz vested in accordance with their terms and the
 (1) terms of the plan under which such shares were issued. Mr. Dietz elected to withhold an aggregate of 229 shares to pay the related taxes. As such, the number of shares actually issued was 452.

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.