## Edgar Filing: CSX CORP - Form 4

CSX CORF Form 4	)										
March 08, 2	2017										
FORM	ЛЛ									PPROVAL	
	UNITED	STATES		RITIES A			NGE	COMMISSIO	N OMB Number:	3235-0287	
Check t if no lor	nger								Expires:	January 31, 2005	
if no longer subject to Section 16. Form 4 or					BENEF RITIES	ICIAI	LOV	VNERSHIP OF	Estimated burden hoi	average urs per	
Form 5 obligati may con <i>See</i> Inst 1(b).	Filed pur ons Section 17(	(a) of the H	Public U		lding Co	npany	Act	nge Act of 1934, of 1935 or Secti 940		. 0.5	
(Print or Type	Responses)										
Harrison E Hunter S				er Name <b>an</b> ORP [CS		r Tradinş	g	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (	Middle)	CSX CORP [CSX] 3. Date of Earliest Transaction					(Check all applicable)			
500 WATER STREET			(Month/Day/Year) 03/06/2017					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chief Executive Officer			
				f Amendment, Date Original ed(Month/Day/Year)			<ol> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ol>				
JACKSON	WILLE, FL 32202	2							More than One R		
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securit	ties A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactic Code (Instr. 8)	Disposed	(A) or of (D)	I	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D) H	Price	(Instr. 3 and 4)			
Reminder: Re	eport on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned dire	ectly o	r indirectly.			
								pond to the colle ained in this form		SEC 1474 (9-02)	

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02 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	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	Transactio	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	(Mo	nth/Day/Year) (	(Instr. 8	Í	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
			(	Code '	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Option	\$ 49.79	03/06/2017		А		9,000,000		<u>(1)</u>	03/05/2027	Common Stock	9,000,0

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Harrison E Hunter 500 WATER STREET JACKSONVILLE, FL 32202	Х		Chief Executive Officer					
Signatures								
/s/ Mark D. Austin, Attorney-in-Fact		03/08/2017	7					
**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).

The award is scheduled to vest and become exercisable as follows: (1) 4,500,000 of the options vest based on continued employment with 1,125,000 of such options vesting on each of the first, second, third and fourth anniversaries of the date of grant and (2) the remaining

(1) 4,500,000 options are eligible to vest in equal parts (subject to continued employment) on the date of the issuance of the audit report by the company's auditor for each of fiscal years 2017, 2018, 2019 and 2020, subject to the attainment of certain performance goals with the ability for options that did not vest based on performance during a prior fiscal year to vest in a subsequent fiscal year upon the attainment of subsequent year performance goals.

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.