## Edgar Filing: Dorman Products, Inc. - Form 4

Dorman Products	, Inc.									
Form 4										
December 12, 201	16								PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	STATEMEN Filed pursuar Section 17(a) of	T OF CHAN	GES IN I SECURI 6(a) of the ility Hold	Expires: Estimated burden hou response	urs per					
(Print or Type Respor	ises)									
1. Name and Address BARTON MATH	Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol Dorman Products, Inc. [DORM]				5. Relationship of Reporting Person(s) to Issuer				
(Lest) (	First) (Middle				JKIVI	. <b>]</b>	(Check all applicable)			
(Last) ( C/O DORMAN I INC., 3400 WAL	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 12/08/2016				X Director 10% Owner X Officer (give title Other (specify below) below) President and CEO				
COLMAR, PA 1	Amendment, Date Original d(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
							Person			
(City) (S	State) (Zip)	Tabl	e I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
	an	xecution Date, if		Disposed (Instr. 3,	(A) of (D 4 and (A) or	) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 12/	08/2016		Code V A	Amount 8,000	(D) A	Price \$ 0	128,603	D		
Common Stock							600	I	By Trust	
Common Stock							2,002 (1)	I	By 401(k)	

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

## Edgar Filing: Dorman Products, Inc. - Form 4

#### 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)	4. Transactio Code (Instr. 8)	<ol> <li>6. Date Exercisable</li> <li>ctionNumber Expiration Date of (Month/Day/Year</li> <li>B) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)</li> </ol>		Date	Amou Under Secur	tle and unt of erlying rities 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Repo	rting C	)wners	Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

ther

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Ot			
BARTON MATHIAS J C/O DORMAN PRODUCTS, INC. 3400 WALNUT STREET COLMAR, PA 18915	Х		President and CEO				
Signatures							
/s/ by Thomas J. Knoblauch, by Pow Attorney	er of	12/12/2016					
**Signature of Reporting Person			Date				
Evalenation of Deene							

## **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 shares are represented by units held in a unitized stock fund through the issuer's 401(k) Retirement Plan and Trust. The unitized stock fund of the issuer's 401(k) Retirement Plan and Trust consists of cash and common stock in amounts that vary from time to time.

(1) As of September 30, 2016, the reporting person had 1,302 units in the issuer's 401(k) Retirement Plan and Trust, which units consisted of 2,002 shares of common stock.

### **Remarks:**

The filing of this Statement shall not be construed as an admission (a) that the person filing this Statement is, for the purposes

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.