## Edgar Filing: ARCH COAL INC - Form 4

ARCH COA	L INC											
Form 4												
February 27,	2017											
FORM	4					~~~				PPROVAL		
	UNITEL	) STATE:		ITIES A hington,			NGE (	COMMISSION	OMB Number:	3235-0287		
Check thi if no long									Expires:	January 31,		
subject to		MENT O	F CHAN		GES IN BENEFICIAL OWN				Estimated a	2005 average		
	Section 16.				SECURITIES				burden hours per			
Form 4 or Form 5			~ • •		~ .				response	0.5		
obligatior	• · · · ·							ge Act of 1934,				
may conti				•	•	- ·		of 1935 or Sectio	n			
See Instru	iction	30(n)	) of the Inv	vestment	Compan	y Aci	OI 19	40				
1(b).												
(Print or Type R	Responses)											
	ddress of Reporting	g Person <u>*</u>	2. Issuer	Name and	Ticker or '	Tradin	g	5. Relationship of	Reporting Person(s) to			
JONES ROBERT G Symbol								Issuer				
				H COAL INC [ARCH]				(Check all applicable)				
(Last)	(Last) (First) (Middle) 3. Date of E				ansaction			(Check an applicable)				
			(Month/D	onth/Day/Year)				Director 10% Owner				
ONE CITYPLACE DRIVE 02/23/20				23/2017				X_ Officer (give title Other (specify below) below)				
								· · · · · · · · · · · · · · · · · · ·	, Gen Counsel	& Secy		
				If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				Month/Day/Year)				Applicable Line)				
								_X_ Form filed by				
ST. LOUIS,	MO 63141							Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction D	ate 2A. De	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year) Execu		on Date, if	Transacti	onAcquired			Securities	Form: Direct	Indirect		
(Instr. 3)		any			Disposed				D) or	Beneficial		
		(Month	/Day/Year)	(Instr. 8) (Instr. 3, 4 an		4 and	5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
						( • )		Reported	(11041)	(110411.)		
						(A) or		Transaction(s)				
				Code V	Amount		Price	(Instr. 3 and 4)				
Common	02/23/2017			А	1,792	А	<u>(1)</u>	1,792	D			
Stock	02/20/2017				(1)			-,//=	~			

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
JONES ROBERT G ONE CITYPLACE DRIVE ST. LOUIS, MO 63141			Sr. VP-Law, Gen Counsel & Secy				
Signatures							
/s/ Rosemary L. Klein, Attorney-in-Fact		02/27/2	2017				
<u>**</u> Signature of Reporting Person		Date					
Evalenation of De							

## **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).
- (1) Represents shares issued at a per share price of \$73.11 on settlement of performance units granted to the reporting person for the 2014-2016 performance period, that vested based on the level of achievement of the applicable performance conditions.

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.