#### Edgar Filing: ASBJORNSON NORMAN H - Form 4

ASBJORNS Form 4 January 26,	ON NORMAN H	-	-							
								OMB	APPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287	
Check the if no lon			8		Expires:	January 31, 2005				
subject t Section Form 4 c	6. <b>STATEMI</b>	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction Form 5 obligations May continue. See Instruction Form 5 See Instruction Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 Section 1940 S										
(Print or Type	Responses)									
ASBJORNSON NORMAN H Symbol			Issuer Name anbol		or Tradi	ing	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Mi		Date of Earlies	_	1		(Che	ck all applica	ble)	
, , ,	C, 2425 SOUTH YU	(Mo	(Month/Day/Year)				X DirectorX 10% Owner X Officer (give title Other (specify below) below) CEO			
(Street) 4. If Amer Filed(Mon				Date Origin (ear)	al		<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>			
TULSA, O	K 74107						Person	wore than one	Reporting	
(City)	(State) (Z	Zip)	Table I - No	n-Derivativ	e Secu	rities Ac	quired, Disposed	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)		Code	Transaction(A) or Disposed 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)		
Common			Code	V Amount		Price	(Instr. 3 and 4)			
Stock, par value \$.004	01/26/2018		F	2,009	D	\$ 36.3	9,135,125	D		
Common Stock, par value \$.004							154,000	I	Private Foundation	
Common Stock, par value \$.004							554,108	I	Trustee of trusts	

Common			
Stock, par	6,367	т	401(k) Plan
value	0,307	1	401(K) Fiall
\$.004			

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 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. P Der Sec (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 23.57					02/26/2016	02/26/2025	Common Stock	38,320	
Stock Option (Right to Buy)	\$ 20.92					01/26/2017	01/26/2026	Common Stock	34,990	
Stock Option (Right to Buy)	\$ 34.4					02/22/2018	02/22/2027	Common Stock	35,870	
Stock Option (Right to Buy)	\$ 36.95					01/02/2019	01/02/2028	Common Stock	115,700	

### **Reporting Owners**

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

ASBJORNSON NORMAN H			
AAON INC	x	х	CEO
2425 SOUTH YUKON	Λ	Λ	CLU
TULSA, OK 74107			
~ .			

#### Signatures

Norman H. Asbjornson 01/26/2018

<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).

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.