Edgar Filing: Xylem Inc. - Form 4

Xylem Inc. Form 4 February 23,	2017												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL				
Washington, D.C. 20549								OMB Number:	3235-0287				
Check this box if no longer					-					Expires:	January 31,		
subject to STATEMENT OF CHAI				NGES IN BENEFICIAL OWN				LOW	NERSHIP OF	Estimated a	2005 average		
Section 16.					SECURITIES					burden hours per			
Form 4 o Form 5	Form 4 or								response	0.5			
obligation	no -								ge Act of 1934,				
may cont				•		•	• •		f 1935 or Sectio	n			
See Instru	uction	30(n) 0	of the Inv	/estmen	ιC	ompany	Act	01 19	40				
1(b).													
(Print or Type F	Responses)												
× •••													
1. Name and A	ddress of Reporting F	Person <u>*</u>	2. Issuer	Name an	d T	Ticker or T	Fradin	g	5. Relationship of	of Reporting Person(s) to			
Toussaint C	laudia S	Ś	Symbol	-				C	Issuer				
			Xylem I	ylem Inc. [XYL]					(Check all applicable)				
(Last)	(First) (M	liddle)	3. Date of	Earliest T	Tran	isaction			(Check all applicable)				
		((Month/Day/Year)					Director		Owner			
				02/21/2017					XOfficer (give titleOther (specify below) below)				
INTERNATIONAL DRIVE									SVP, GC & Corporate Secretary				
(Street) 4.1				4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
	Filed(Month/Day/Year)					Applicable Line)							
							_X_Form filed by One Reporting Person						
RYE BROC	OK, NY 10573								Form filed by N Person	Nore than One Re	eporting		
(City)	(State) (Zip)	T 11	T N T	D	• • • •				e 15 er i 1			
								ties Ac	quired, Disposed of		-		
1.Title of				3. 4. Securities						6. Ownership Form: Direct	7. Nature of Indirect		
Security (Instr. 3)	(Month/Day/Year)	any	on Date, if TransactionAcquired (A) or Code Disposed of (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Securities Beneficially	(D) or	Beneficial			
(11041-0)								Owned	Indirect (I)	Ownership			
									Following	Instr. 4)	(Instr. 4)		
							(A)		Reported Transaction(s)				
				Cala		A	or	Deter	(Instr. 3 and 4)				
Common				Code		Amount 3,880	(D)	Price					
Stock	02/21/2017			А		(1)	А	\$0	47,913	D			
Stock						_							

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. Transactio Code (Instr. 8)	5. Number of orDerivative 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Options (Right to Buy)	\$ 48.33	02/21/2017		А	17,606	(2)	02/21/2027	Common Stock	17,606

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Toussaint Claudia S C/O XYLEM INC. 1 INTERNATIONAL DRIVE RYE BROOK, NY 10573			SVP, GC & Corporate Secretary				
Signatures							
/s/ Juliene Patton, by power of a Toussaint	attorney f	or Claudia S	02/23/2017				

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

**Signature of Reporting Person

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Reflects an award of restricted stock units which are scheduled to vest in three equal annual installments beginning on February 21, 2018.

Date

(2) These options vest in three equal annual installments beginning on February 21, 2018.

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.