FERNANDEZ JAMES N

Form 4

February 05, 2018

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287

0.5

Check this box if no longer

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

OMB APPROVAL

subject to Section 16. Form 4 or Form 5

obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

burden hours per response...

may continue. *See* Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * FERNANDEZ JAMES N | | | 2. Issuer Name and Ticker or Trading Symbol DUN & BRADSTREET CORP/NW [DNB] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |
|---|--|----------|--|--|
| (Last) 103 JFK PAF | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 02/01/2018 | _X_ Director 10% Owner Officer (give title below) Other (specify below) |
| SHORT HILL | (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Report Form filed by More than Original Person | | | |
| (City) | (State) | (Zip) | Table I - Non-Derivative Securities Acc | nuired. Disposed of, or Beneficially Owned |

| • | , , | 1 ab | ie i - Non-i | Derivative | Secu | riues Acqu | nrea, Disposea oi, | , or Beneficial | ly Owned |
|---|---------------------|--------------------|--------------|------------|-----------|--------------|--------------------|-----------------|--------------|
| 1.Title of | 2. Transaction Date | 2A. Deemed | 3. | 4. Securi | ties A | cquired | 5. Amount of | 6. | 7. Nature of |
| Security | (Month/Day/Year) | Execution Date, if | Transactio | on(A) or D | ispose | d of (D) | Securities | Ownership | Indirect |
| (Instr. 3) | | any | Code | (Instr. 3, | 4 and | 5) | Beneficially | Form: | Beneficial |
| | | (Month/Day/Year) | (Instr. 8) | | | | Owned | Direct (D) | Ownership |
| | | | | | | | Following | or Indirect | (Instr. 4) |
| | | | | | () | | Reported | (I) | |
| | | | | | (A) | | Transaction(s) | (Instr. 4) | |
| | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | |
| Common Stock | 02/01/2018 | | M | 2,590 | A | \$ 88.365 | 31,377.2325 | D | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(9-02)

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) | ransaction Derivative Expiration ode Securities (Month/I | | e | 7. Title and Amour Underlying Securit (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|--|--|---------------------|--------------------|--|---------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amo or Num of Share |
| Non-Qualified Stock Option (right to buy) | \$ 88.365 | 02/01/2018 | | M | 2,590 | 02/06/2009 | 02/06/2018 | Common Stock | 2,5 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| reporting owner runner runners | Director | 10% Owner | Officer | Other | | | |
| FERNANDEZ JAMES N 103 JFK PARKWAY SHORT HILLS, NJ 07078 | X | | | | | | |

Signatures

/s/ Karen K. Pettiford-Wilson for James N. Fernandez by POA previously filed 02/05/2018

**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.

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