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CSS INDU	STRIES INC									
Form 4										
June 02, 20	16									
FORM	ЛЛ								PPROVAL	
	UNITED	STATES			AND EXCH. , D.C. 20549		COMMISSION	OMB Number:	3235-0287	
Check t				0	·			Expires:	January 31,	
if no lor subject		WNERSHIP OF	•	2005						
Section Form 4	16.				Estimated burden hou	urs per				
Form 5		repart to	Section	16(a) of tl	ne Securities	Exchar	nge Act of 1934,	response	. 0.5	
obligati	ons Section 17(of 1935 or Section	n		
may con	nunue.			•	t Company A	•		511		
<i>See</i> Inst 1(b).	ruction	50(II)	or the r	ii vestinen	company m		210			
- (-).										
(Print or Type	Responses)									
1 Name and	Address of Reporting	Person *	. .	N	J.T. J. T.	1.	5 Relationship o	f Reporting Per	rson(s) to	
Munyan Christopher J Symb				2. Issuer Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer			
				CSS INDUSTRIES INC [CSS]						
			CSS INDUSTRIES INC [CSS]				(Check all applicable		e)	
				B. Date of Earliest Transaction						
			(Month/Day/Year) 05/31/2016				_X_ Director 10% Owner _X_ Officer (give title Other (specify			
	TH ROAD, SUIT		05/31/2	2016			below)	below)	(speeny	
FLIMOU	IN KOAD, SUIT	E 300					Pro	esident & CEO		
			4. If Am	If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
			led(Month/Day/Year)			Applicable Line)				
							X Form filed by	One Reporting P More than One R		
PLYMOU	TH MEETING, P.	A 19462					Person	wore than one R	eporting	
(City)	(State)	(Zip)	Tal	ole I - Non-	Derivative Secu	ırities A	cquired, Disposed o	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	2A. Deemed Execution Date, if any (Month/Day/Year)		3.	4. Securities		5. Amount of	6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)							Form: Direct	Indirect	
				Code (Instr. 8)	Disposed of (I (Instr. 3, 4 and		•	(D) or Indirect (I)	Beneficial Ownership	
		(Monui/Da	ay/rear)	(Instr. 8)	(Instr. 5, 4 and	(3)		(1) (Instr. 4)	(Instr. 4)	
							Reported	((
					(A) or		Transaction(s)			
				Code V	Amount (D)	Price	(Instr. 3 and 4)			

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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount o
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (or Dispose (D) (Instr. 3, 4 and 5)	ed of				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Call (Stock) Option	\$ 27.48	05/31/2016		A		50,000		05/31/2017 <u>(1)</u>	05/31/2023	Common Stock	50,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Munyan Christopher J C/O CSS INDUSTRIES, INC. 450 PLYMOUTH ROAD, SUITE 300 PLYMOUTH MEETING, PA 19462	Х		President & CEO				
Signatures							
Michael A. Santivasci, Attorney in Fact	06/0	02/2016					
**Signature of Reporting Person	1	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).

Reflects first anniversary of the date of grant for options granted pursuant to a Rule 16b-3 plan. Options are exercisable in installments of
 (1) 25% of the optioned securities on and after the first anniversary of the date of grant and to the extent of an additional 25% of the optioned securities on and after the 2nd, 3rd and 4th anniversaries of the date of grant. To the extent not exercised, installments are cumulative.

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.