## Edgar Filing: KLEIN ROXANNE B - Form 4

Form 4	ANNE B											
February 13,	2019											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL				
	Washington, D.C. 20549						OMB Number:	3235-0287				
Check this box if no longer subject to Section 16. Form 4 or				HANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: January 31 2005 Estimated average burden hours per response 0.5	
obligatio may cont	Form 5 obligations may continue. See Instruction 1(b). 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 30(h) of the Investment Company Act of 1940											
(Print or Type I	Responses)											
KLEIN ROXANNE B Sym				2. Issuer Name <b>and</b> Ticker or Trading Symbol KNOLL INC [KNL]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O KNOL STREET	(First) L, INC., 1235	(Middle) WATER	3. Date of (Month/Da 02/11/20	ay/Year)		nsaction			Director X Officer (give below)	10%	b Owner er (specify	
	(Street)		4. If Amer Filed(Mon			e Original			6. Individual or Jo Applicable Line) _X_ Form filed by	*		
EAST GRE	ENVILLE, PA	<b>1</b> 8041							Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non	1-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Execut any	emed ion Date, if h/Day/Year)	Code (Instr.	8)	4. Securit nAcquired Disposed (Instr. 3, Amount	(A) o of (D	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/11/2019			А		6,740 (1)	А	\$0	23,332	D		

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)	Code	Transaction of Derivative		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	
Restricted Stock Units	<u>(2)</u>	02/11/2019		А	6,740 <u>(3)</u>	(4)	(4)	Common Stock	6,740 ( <u>3)</u>	\$

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KLEIN ROXANNE B C/O KNOLL, INC. 1235 WATER STREET EAST GREENVILLE, PA 18041			SVP-Human Resources				
Signatures							
/s/ Michael A. Pollner, Attorney-in-Fact		02/13/2019	9				

\*\*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).
- (1) These restricted shares will cliff vest on the third anniversary of the date of grant, based on continued service.
- (2) Each restricted stock unit represents a contingent right to receive, at settlement, one share of the issuer's common stock.
- (3) Represents the target amount of restricted stock units granted to reporting person on the transaction date. Zero to one hundred twenty-five percent of the target amount can vest, subject to the issuer's satisfaction of certain performance criteria.
- (4) These restricted stock units vest after a three-year performance period, subject to the issuer's satisfaction of certain performance criteria.

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.