## Edgar Filing: MASON KATHLEEN - Form 4

MASON KA	THLEEN								
Form 4									
September 04	4, 2018								
FORM	14							OMB AF	PPROVAL
	UNITE	O STATES	SECURITIES A Washington,			NGE C	COMMISSION	OMB Number:	3235-0287
Check thi if no long								Expires:	January 31,
subject to		MENT OF	F CHANGES IN		CIA	LOW	NERSHIP OF	Estimated a	2005 Iverage
Section 1			SECUR	ITIES				burden hou	
Form 4 or Form 5				с ···	-			response	0.5
obligation	no *		Section 16(a) of th			•		_	
may cont	inue. Section 1		Public Utility Hole of the Investment	•	• •			1	
See Instru 1(b).	uction	50(II)	of the investment	Company	y AC	t 01 19 <del>4</del>	0		
(Print or Type F	Responses)								
1. Name and A MASON KA	ddress of Reportin	g Person <u>*</u>	2. Issuer Name <b>and</b> Symbol		Fradir	ıg	5. Relationship of Issuer	Reporting Pers	son(s) to
			GENESCO INC	[GCO]			(Chec)	k all applicable	
(Last)	(First)	(Middle)	3. Date of Earliest Tr	ansaction			(ener	ii uii uppiieucie	,
			(Month/Day/Year)				_X_ Director		Owner
GENESCO MURFREE	INC., 1415 SBORO ROAE	)	09/04/2018				Officer (give below)	below)	er (specify
	(Street)		4. If Amendment, Da	ate Original			6. Individual or Jo	int/Group Filir	g(Check
			Filed(Month/Day/Year	)			Applicable Line) _X_ Form filed by C Form filed by M		
NASHVILL	LE, TN 37217						Person		porting
(City)	(State)	(Zip)	Table I - Non-I	Derivative S	ecur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea		n Date, if Transactio Code Day/Year) (Instr. 8)	4. Securiti on(A) or Dis (Instr. 3, 4)	sposed	d 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)	
Common Stock	09/04/2018		S	500 <u>(1)</u>	. ,	\$ 50.75	43,126	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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address Director 10% Owner Officer Other
MASON KATHLEEN GENESCO INC. X 1415 MURFREESBORO ROAD NASHVILLE, TN 37217
Signatures
Roger G. Sisson, attorney-in-fact09/04/2018
**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).

(1) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on April 10, 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.