FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

shington,	D.C.	20549	
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OIVIB APPROVAL										
OMB Number:	3235-0287									
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hours per response:	0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>LAUDERBACK BRENDA J</u>					2. Issuer Name and Ticker or Trading Symbol WOLVERINE WORLD WIDE INC /DE/ WWW ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
				l <sub>w</sub>											X Dire	ecto	r		10% O	wner			
						,										Officer (give title		Other (s		specify			
(Last)	(Fi	rst) (	(Middle)					est Tran	sacti	ion (Mon	th/D	ay/Year)				bel	ow)			below)			
C/O 9341 COURTLAND DRIVE NE				04/	04/29/2021																		
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)							
ROCKFORD MI 49351															X Form filed by One Reporting Person								
-																	Form filed by More than One Reporting Person				orting		
(City)	(S	tate) (	(Zip)													Pei	SON						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3) 2. Transac				action	Execution Date, ay/Year) if any				3. 4. Secu			ities Acc	uirec	d (A) or	5. Ar			vnership n: Direct	7. Nature of Indirect				
Date (Month/D								Day/Ye	Code (Instr.		Disposed Of (D) (Instr. 3, 5)			. 3, 4 and	Bene	ficia	ally (D)		r Indirect	Beneficial			
						(Month/Day/Yea		ar)   i	7) 8)						Owned Reporte		d		Instr. 4)	Ownership (Instr. 4)			
										Code \	/	Amount	(A (D	) or )	Price		Transaction(s) (Instr. 3 and 4)						
Common Stock 04/29				9/2021	/2021				М		6,140	0 A		(1)		24,425			D				
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 (Month/Day/Year)	3A. Deeme		4.					ate Exer		ble and	7. Title and			8. Price		9. Number		10.	11. Nature		
Derivative Security	Conversion or Exercise		Execution if any							iration D nth/Day/		n)	Amount of Securities			Derivati Security				Ownership Form:	of Indirect Beneficial		
(Instr. 3)	r. 3) Price of \ \ (Month/Day/Year)   8) \ Securities \ \ (Underlying								oouritu	(Instr. 5	Instr. 5) Beneficia Owned Followin Reported Transact			Direct (D) or Indirect	Ownership								
	Derivative Security Acquired (A) or (Instr. 3 and 4 Disposed of (D)													g (I) (Instr. I									
							(Instr. 3, 4 and 5)											(Instr. 4)	,(0,				
								·			Т			1	Amount	unt				1			
															or Number								
				- 1	Code	v	(A)	(D)	Date Exe	e rcisable		cpiration ate	Title		of Shares								
Restricted Stock	(1)	04/29/2021			M			6,140		(2)		(2)	Commo		6,140	\$0.00		0		D			

## **Explanation of Responses:**

- 1. Restricted stock units convert into shares of Common Stock on a one-for-one basis.
- 2. On April 29, 2020, the Reporting Person was granted 6,140 restricted stock units, vesting on the first anniversary of the grant date.

## Remarks:

/s/ David Latchana, by Power of Attorney

05/03/2021

\*\* Signature of Reporting Person

Date

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

- \* 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.

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 Number.