FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20549	
vasilligion,	D.C.	20349	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL								
OMB Number: 3235-0287									
Estimated average burden									
hours per response.									

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

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*  JEPPESEN MICHAEL					2. Issuer Name and Ticker or Trading Symbol WOLVERINE WORLD WIDE INC /DE/ [ WWW ]								(Ched	ck all app	licable)		rerson(s) to Issuer  10% Owner Other (specify		
(Last) 9341 CO	(Fi	est) (N O DRIVE NE	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/09/2021								X	below			below)		
(Street) ROCKF(			9351 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Transac Date (Month/Da	y/Year)   Executi		cution Date, y				4. Securitie Disposed C 5)						6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)	or P	rice	Transa (Instr. 3	tion(s)			(111511.4)	
Common Stock 02/09					021			A		9,201	A	1	34.22	22 53,235		D			
Common Stock 02/09/2					2021			F		2,632	D	\$	\$34.22		50,603		D		
Common Stock 02/10/2					2021		F		6,254	D		\$33.9	3.9 44,349			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  3. Transaction Execution Date, if any (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)  4. Transaction Date Date Execution Date Execution Date Execution Date Date Execution Date Date Execution Date Date Execution Date Date Date Date Date Date Date Date				vative urities uired or oosed o)	Expiration Date Amo (Month/Day/Year) Sec Und Deri				7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		Price of erivative ecurity estr. 5)	9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

**Explanation of Responses:** 

Remarks:

/s/ David Latchana, by Power

02/11/2021

of Attorney

\*\* 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.