

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2.	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Johnson Wil	liam				V	Velbi	ilt, In	c. [WB	T]						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
(Last)	(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							X Director 10% Owner X Officer (give title below) Other (specify below)					
2227 WELBILT BOULEVARD						11/20/2018						X Officer (give title below) Other (specify below) President and CEO						
	(Stre	et)			4.	If An	nendm	ent, Date	Ori	ginal Fi	led (MM	/DD/YY	YY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
NEW PORT RICHEY, FL 34655 (City) (State) (Zip)											X_Form filed by One Reporting Person Form filed by More than One Reporting Person							
			Table	e I - Nor	ı-De	erivati	ive Sec	urities A	.cqu	ired, D	isposed	l of, or	Bei	neficially Owne	ed			
1.Title of Security (Instr. 3)			2	2. Trans. Date		2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquired Disposed of (D) (Instr. 3, 4 and 5)			or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
								Code	V	Amount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				11/20/201	8			P		29962	A	\$13.3326	<u>(1)</u>		29962		D	
	Tabl	e II - Der	ivativ	e Securi	ities	Bene	ficially	Owned	(e.į	g. , puts	, calls,	warra	nts,	options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative	Date Ex	Execut				5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date			rities /ativ	nd Amount of Underlying the Security and 4)	Derivative Security	Securities Beneficially Owned	Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security				Code	v	(A)	(D)		ate xercisable	Expirati Date	on Title	Am Sha	nount or Number of ares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$13.26 to \$13.35, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, additional information regarding the number of shares purchased at each separate price within the range set forth in this footnote.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Johnson William								
2227 WELBILT BOULEVARD	X		President and CEO					
NEW PORT RICHEY, FL 34655								

Signatures

/s/ Priya A. Galante, as Attorney-in-Fact	11/23/201		
**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 control number.