

JONES DOUGLAS M
Form 3
September 19, 2011

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â JONES DOUGLAS M		(Month/Day/Year)	WOLVERINE WORLD WIDE INC /DE/ [WWW]	
(Last)	(First)	(Middle)	09/09/2011	
C/O 9341 COURTLAND DRIVE NE			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
ROCKFORD,Â MIÂ 49351			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below)	(specify below)
			Corporate Controller	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,160	D	Â

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Title	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
-----------------------------------------------	-------------------------------------------------------------	-----------------------------------------------------------------------------------------	--------------------------------------------------------	---------------------------------------------------------	----------------------------------------------------------

Edgar Filing: JONES DOUGLAS M - Form 3

	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Stock Option (Right to Buy)	02/09/2012	02/08/2021	Common Stock	707	\$ 36.49	D	Â
Stock Option (Right to Buy)	02/09/2013	02/08/2021	Common Stock	707	\$ 36.49	D	Â
Stock Option (Right to Buy)	02/09/2014	02/08/2021	Common Stock	706	\$ 36.49	D	Â
Stock Option (Right to Buy)	02/10/2012	02/10/2020	Common Stock	883	\$ 25	D	Â
Stock Option (Right to Buy)	02/10/2013	02/10/2020	Common Stock	883	\$ 25	D	Â
Stock Option (Right to Buy)	02/10/2012	02/10/2020	Common Stock	127	\$ 25	D	Â
Stock Option (Right to Buy)	02/10/2013	02/10/2020	Common Stock	126	\$ 25	D	Â
Stock Option (Right to Buy)	07/13/2012	07/12/2019	Common Stock	1,100	\$ 22.08	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
JONES DOUGLAS M C/O 9341 COURTLAND DRIVE NE ROCKFORD, MI 49351	Â	Â	Â Corporate Controller	Â

Signatures

/s/ Timothy E. Foley, by Power of Attorney
Date: 09/19/2011

**Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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. 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.