1. Name and Address of Reporting Person
Sharon H. Simpson
21C Orinda Way
Orinda, CA 94563

2. Issuer Name and Ticker or Trading Symbol
SIMPSON MANUFACTURING CO INC /CA/ [ SSD ]

3. Date of Earliest Transaction (Month/Day/Year)
01/26/2018

5. Relationship of Reporting Person(s) to Issuer
Director
Officer (give title below) X
10% Owner
Other (specify below)

4. If Amendment, Date of Original Filed (Month/Day/Year)

6. Individual or Joint/Group Filing (Check Applicable Line)
Form filed by One Reporting Person X
Form filed by More than One Reporting Person

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**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Transaction Date (Month/Day/Year)</th>
<th>Transaction Code</th>
<th>Amount</th>
<th>Securities Acquired or Disposed Of</th>
<th>Price</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>01/26/2018</td>
<td>S</td>
<td>37,300</td>
<td>D</td>
<td>$59.979</td>
<td>4,575,730 (1)</td>
</tr>
<tr>
<td>Common Stock</td>
<td>01/29/2018</td>
<td>S</td>
<td>33,400</td>
<td>D</td>
<td>$59.767</td>
<td>4,542,330 (1)</td>
</tr>
<tr>
<td>Common Stock</td>
<td>01/30/2018</td>
<td>S</td>
<td>50,125</td>
<td>D</td>
<td>$59.115</td>
<td>4,492,205 (1)</td>
</tr>
</tbody>
</table>

1. Title of Security (Instr. 3)
2. Transaction Date (Month/Day/Year) (Instr. 4)
3. Transaction Code (Instr. 8)
4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)
5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)
6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)
7. Nature of Indirect Beneficial Ownership (Instr. 4)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned**

<table>
<thead>
<tr>
<th>Title of Derivative Security</th>
<th>Conversion or Exercise Price of Derivative Security</th>
<th>Transaction Code (Instr. 8)</th>
<th>Number of Derivative Securities Acquired or Disposed Of (D) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>Date Exercisable and Expiration Date (Month/Day/Year)</th>
<th>Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)</th>
<th>Price of Derivative Security (Instr. 5)</th>
<th>Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
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</table>

**Explanation of Responses:**

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).


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.