Capitol Federal Financial Inc

Form 4

January 03, 2017

FORM 4

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

OMB Number: 3235-0287

burden hours per

response...

5. Relationship of Reporting Person(s) to

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

0.5

OMB APPROVAL

Form 4 or Form 5 obligations may continue. See Instruction

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

2 Jaguar Nama and Tiakar or Trading

1(b).

stock

(Print or Type Responses)

1. Name and Address of Reporting Person *

Haag Natalie G.			2. Issuer Name and Ticker or Trading Symbol Capitol Federal Financial Inc [CFFN]					Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)			Director 10% OwnerX_ Officer (give title Other (specify					
	OL FEDERAL L, 700 KANSA		12/30/2					below) Execut	below) tive Vice President	ent	
	(Street)			endment, Da nth/Day/Year		ıl		6. Individual or Joint/Group Filing(ChecApplicable Line)_X_ Form filed by One Reporting Person			
TOPEKA, I	KS 66601							Form filed by I Person	More than One Re	eporting	
(City)	(State)	(Zip)	Tabl	le I - Non-E	Derivative	Secui	rities Acq	uired, Disposed o	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	med n Date, if Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
CFFN common stock	12/30/2016			Code V M	Amount 2,407	(D)	Price \$ 12.11	43,166	D		
CFFN common stock	12/30/2016			D	2,407	D	\$ 16.46	40,759	D		
CFFN common								6,929	I	ESOP	

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

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(9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo Underlying Secur (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am or Nu of S
CFFN phantom stock 2014	\$ 12.11	12/30/2016		M		2,407	<u>(1)</u>	12/31/2016	CFFN common stock	2,
CFFN Phantom Stock	\$ 16.46	12/30/2016		A	2,690		<u>(1)</u>	12/31/2019	CFFN Phantom Stock	2,
CFFN Phantom Stock	\$ 12.56						<u>(1)</u>	12/31/2018	CFFN common stock	2,
CFFN phantom stock 2015	\$ 12.78						<u>(1)</u>	12/31/2017	CFFN common stock	2,
CFFN Incentive Stock Option	\$ 11.85						(2)	09/25/2022	CFFN common stock	16
CFFN Non-qualified Stock Option	\$ 11.85						(2)	09/25/2027	CFFN common stock	7,

Reporting Owners

Reporting Owner Name / Address	oorting Owner Name / Address				
	Director	10% Owner	Officer	Other	

Haag Natalie G. C/O CAPITOL FEDERAL FINANCIAL 700 KANSAS AVENUE **TOPEKA, KS 66601**

Executive Vice President

2 Reporting Owners

Signatures

James D. Wempe, Power of Attorney

01/03/2017

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) The phantom stock units are acquired under the Issuer's Deferred Incentive Bonus Plan and settled in cash three years from the date of acquisition.
- (2) All options are exercisable.

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.

Signatures 3