Edgar Filing: HUEY MORRIS J II - Form 4

HUEY MOR	RIS J II										
Form 4											
November 02	2, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE OF								OMB APPROVAL			
CURIVI 4 UNITED STATES SECURITIES AN Washington, I								OMB Number:	3235-0287		
Check thi				,	D .C. 2 0				Expires:	January 31,	
if no longer STATEMENT OF CHAI				NGES IN BENEFICIAL OWNERSHIP (NERSHIP OF	Estimated average burden hours per		
subject to STATEMENT OF CHART				SECURITIES							
Form 4 or									response	0.5	
Form 5	The pursuant to section 10(a) of the securities Exchange Act										
obligation may cont				•	•	· ·	•	f 1935 or Section	n		
See Instru		30(h)	of the In	vestment	Compar	iy Ac	ct of 194	40			
1(b).											
(Print or Type F	Pernonses)										
(I fint of Type I	(csponses)										
HUEY MORRIS J II Symbol Capitol			r Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
			-								
										[CFFN]	
			(Last)	(First) (1	Middle)					3. Date of	f Earliest Tr
			Day/Year)			Officer (give title Other (specify below)					
C/O CAPITOL FEDERAL 11/02/2			018				below)	Jelow) Delow)			
	L, 700 S. KANS.	AS									
AVENUE											
			4. If Ame	nendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Mor	(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
									One Reporting Per fore than One Re		
TOPEKA, K	\$ 66603							Person		1 0	
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	rities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deen	ned	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution	n Date, if	Transaction(A) or Disposed of (D)					Form: Direct		
(Instr. 3) any (Month/Day/Y			N (N)	Code (Instr. 3, 4 and 5) $($				Beneficially	Beneficial		
		(Month/L	ay/Year)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
						(1)		Reported	(1115411-1)	(1115411-1)	
						(A) or		Transaction(s)			
				Code V	Amount		Price	(Instr. 3 and 4)			
CFFN							\$				
common	11/02/2018			Μ	5,000	А	11.91	255,655	D		
stock							(1)				

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

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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. Transactio Code (Instr. 8)	5. Nun onof Der Securit Acquin (A) or Dispos (D) (Instr. and 5)	ivative ties red sed of 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
CFFN Non-qualified Stock Option May, 2012	\$ 11.91	11/02/2018		A	0		(2)	05/14/2027	CFFN common stock	0
CFFN Non-qualified Stock Option May, 2012	\$ 11.91	11/02/2018		М	4	5,000	(2)	05/14/2027	CFFN common stock	5,000

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
HUEY MORRIS J II C/O CAPITOL FEDERAL FINANCIAI 700 S. KANSAS AVENUE TOPEKA, KS 66603	X							
Signatures								
Cara J Puglisi, Power of Attorney 1	1/02/2018							
**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) Restricted stock award.
- (2) 3,750 options will vest on January 10, 2013, January 10, 2014, January 10, 2015 and January 10, 2016.

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.