## Edgar Filing: Sorensen Donna J. - Form 4

Form 4											
March 05, 20									OMB AF	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check thi if no long subject to Section 10 Form 4 or		0	BENEF	NERSHIP OF	Expires: January Estimated average burden hours per response						
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 17(	a) of the 1	Public Ut		ling Con	npany	y Act of	e Act of 1934, 1935 or Section 0			
(Print or Type R	Responses)										
Sorensen Donna J. Syn			Symbol	Name and			0	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction (Check					k all applicable)			
			(Month/Day/Year) 03/01/2018					X_ Director10% Owner Officer (give titleOther (specify below) below)			
				ndment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MOLINE, II	L 61265							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	urity (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common	00/01/0010			Code V		(D)	Price \$		P		
Stock	03/01/2018			А	261	А	44.15	12,571	D		
Common Stock								21,245.01	Ι	by Trust	

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

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 Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
				(Instr. 3, 4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number		(IIISU
			Code V	(A) (D)	2	2 410		of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Sorensen Donna J. 3551 7TH ST MOLINE, IL 61265	Х						
Signatures							
By: Rick Jennings For: Donna Sorensen	03/05/2018						
**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).

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.