

Capitol Federal Financial Inc
 Form 4
 November 04, 2016

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2015
 Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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 *
 Ricketts Carlton A.

2. Issuer Name and Ticker or Trading Symbol
 Capitol Federal Financial Inc
 [CFFN]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)
 11/03/2016

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
 Executive Vice President

C/O CAPITOL FEDERAL FINANCIAL, 700 KANSAS AVENUE

(Street)

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

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

TOPEKA, KS 66601

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	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)
				(A) or (D)	Price		
				Code	V	Amount	
CFFN common stock	11/03/2016		M	51,000 A	\$ 11.91	104,020	D
CFFN common stock	11/03/2016		M	28,295 A	\$ 14.19	132,315	D
CFFN common stock	11/03/2016		S	79,295 D	\$ 14.4317	53,020	D

CFFN common stock	36,237	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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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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Security (Instr. 3 and 4)		
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	A or N of
CFFN Non-qualified Stock Option	\$ 11.91	11/04/2016		M	17,416	<u>(1)</u>	05/14/2027	CFFN common stock	1
CFFN Incentive Stock Option	\$ 11.91	11/04/2016		M	33,584	<u>(1)</u>	05/14/2022	CFFN common stock	3
CFFN Incentive Stock Option	\$ 14.19	11/04/2016		M	28,295	<u>(1)</u>	10/19/2017	CFFN common stock	2
CFFN phantom stock 2014	\$ 12.11					12/31/2016 ⁽²⁾	12/31/2016	CFFN common stock	1
CFFN Phantom Stock	\$ 12.56					12/31/2018 ⁽²⁾	12/31/2018	CFFN Phantom Stock	2
CFFN phantom stock 2015	\$ 12.78					12/31/2017 ⁽²⁾	12/31/2017	CFFN common stock	1

Reporting Owners

Reporting Owner Name / Address

Relationships

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Director 10% Owner Officer

Other

Ricketts Carlton A.
C/O CAPITOL FEDERAL FINANCIAL
700 KANSAS AVENUE
TOPEKA, KS 66601

Executive Vice President

Signatures

James D. Wempe, Power of
Attorney

11/04/2016

__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) All options are vested.
- (2) Phantom stock units are acquired under the Company's Deferred Incentive Bonus Plan. The units are deemed sold and settled in cash three years from date of acquisition.

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.