Edgar Filing: KROGER CO - Form 4

KROGER CO

Form 4 May 09, 2005	5											
FORM 4 UNITED STATES SECURITIES AND EXCILANCE COMMISSION									OMB AI	OMB APPROVAL		
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	F CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES					NERSHIP OF	burden hou	Expires: January 31 2005 Estimated average burden hours per response 0.5				
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the		ility Hold	ing Com	pany	Act of	ge Act of 1934, of 1935 or Section 40				
(Print or Type R	Responses)											
1. Name and A VAN OFLE	2. Issuer Name and Ticker or Trading Symbol				g	5. Relationship of Reporting Person(s) to Issuer						
	KROGE	KROGER CO [KR]				(Check all applicable)						
(Last) (First) (Middle) 1014 VINE STREET			3. Date of Earliest Transaction(Month/Day/Year)05/05/2005					Director 10% Owner X Officer (give title Other (specify below) below) V.P. & Corp. Controller				
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year) CINCINNATI, OH 45202									Dne Reporting Person Iore than One Reporting			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecuri	ties Ac	quired, Disposed of	f. or Beneficial	lv Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Executio any		3. Transactic Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4)	ies (A) or of (D) 4 and (A) or	r)	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		
Common Stock						(2)	. ,	13,443.0243 (1)	D			

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number o orDerivative Securities Acquired (A or Disposed (D) (Instr. 3, 4, and 5)	Ex (M	Date Exerc cpiration D Ionth/Day/	ate	7. Title and Amoun Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (I	Da Ex D)	ate kercisable	Expiration Date	Title	Amo or Num of Sh
Non-Qualified Stock Option	\$ 16.385	05/05/2005		А	12,000		(2)	05/05/2015	Common Stock	12,0

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
VAN OFLEN MARY ELIZABETH 1014 VINE STREET CINCINNATI, OH 45202			V.P. & Corp. Controller					
Signatures								
/s/ Mary Elizabeth Van Oflen, by Bru Attorney-in-Fact	ice M. Ga	ck,	05/09/2005					

**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 total amount of securities directly owned by the reporting person includes shares in the Company's employee benefit plans which are deemed to be 'tax-conditioned plans' pursuant to Rule 16b-3, to the extent disclosed on reports received from plan trustees.
- (2) These options were granted under an option plan of The Kroger Co. and vest in equal annual installments in whole amounts over a five-year period, at the rate of 20% per year commencing one year from the date of grant.

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.