Edgar Filing: Aufreiter Nora A - Form 4

Aufreiter Nor Form 4	a A											
March 05, 20	18											
FORM	4									PPROVAL		
	UNIT	ED STATES		ITIES Al hington, 1			NGE (COMMISSION	OMB Number:	3235-0287		
Check this if no longe								Expires:	January 31, 2005			
subject to Section 16	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per					
Form 4 or Form 5		nursuant to	ursuant to Section 16(a) of the Securities Exchange Act of 1934,							0.5		
obligation may conti <i>See</i> Instru- 1(b).	s Section	17(a) of the		ility Hold	ing Com	pany	Act o	f 1935 or Sectio	n			
(Print or Type R	esponses)											
1. Name and Address of Reporting Person <u>*</u> Aufreiter Nora A			2. Issuer Name and Ticker or Trading Symbol KROGER CO [KR]				g	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(Check all applicable)					
THE KROGER CO., 1014 VINE STREET			(Month/Day/Year) 03/01/2018					X Director Officer (give below)	title 10% Owner Other (specify below)			
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 					
CINCINNA	ГІ, ОН 45202	2						Form filed by M Form filed by M Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securit	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Executi any	emed on Date, if /Day/Year)	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, Amount	(A) of of (D) 4 and 2 (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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock				5000	- mount	(2)		10,393	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. 5. Number of Transactio/Derivative 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 Amount of Underlying Securities (Instr. 3 and 4)		8. P Deri Secu (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock - Incentive Shares	\$ 0 <u>(1)</u>	03/01/2018		А	41.007 (2)	(3)	(3)	Common Stock	41.007	\$ 2

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Aufreiter Nora A THE KROGER CO. 1014 VINE STREET CINCINNATI, OH 45202	Х						
Signatures							
/s/ Nora A. Aufreiter, by Stace Attorney-in-Fact		03/05/2018					
<u>**</u> Signature of Repor	ting 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).
- Each phantom share represents the right to receive one common share upon distribution from the deferred compensation account. (1)
- Represents phantom stock acquired in dividend reinvestment transactions under a deferred compensation plan of The Kroger Co. (2)
- Shares of phantom stock will be distributed following termination of the reporting person's services as an Independent Director of The (3) Kroger Co.

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.