Capitol Federal Financial Inc Form 4

August 05, 2016

FORM 4

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

OMB 3235-0287 Number:

response...

5. Relationship of Reporting Person(s) to

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average burden hours per

0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

Van Houweling Tara			_	Symbol Capitol Federal Financial Inc [CFFN]				Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)			Director 10% Owner _X Officer (give title Other (specify below)				
	ГОL FEDERAI AL, 700 S. KAN		08/03/2	2016					Accounting Of	ficer
F				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 Form filed by More than One Reporting		
TOPEKA,	KS 66603							Person	note than one re	porting
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
CFFN common stock	08/03/2016			M	25,000	A	\$ 11.91	43,565	D	
CFFN common stock	08/03/2016			S	18,286	D	\$ 14.02	25,279	D	
CFFN common stock	08/04/2016			S	6,714	D	\$ 14.05	18,565	D	

CFFN

common 28,169 I ESOP stock

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

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SEC 1474

(9-02)

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)	orDeriv Secur Acqu	rities ired (A) sposed of . 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securiti (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
CFFN Incentive Stock Option	\$ 11.91	08/03/2016		M		25,000	<u>(1)</u>	05/14/2022	CFFN common stock	25,0
CFFN Non-qualified Stock Option	\$ 11.91						<u>(1)</u>	05/14/2027	CFFN common stock	6,41
CFFN Phantom Stock	\$ 12.56						(2)	12/31/2018	CFFN Phantom Stock	965
CFFN phantom stock 2014	\$ 12.11						(2)	12/31/2016	CFFN common stock	902
CFFN phantom stock 2015	\$ 12.78						(2)	12/31/2017	CFFN common stock	1,01

Reporting Owners

Reporting Owner Name / Address	Keiauonsinps						
	Director	10% Owner	Officer	Other			
Van Houweling Tara			Principal				
C/O CAPITOL FEDERAL FINANCIAL			Accounting				

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700 S. KANSAS AVENUE TOPEKA, KS 66603 Officer

Signatures

James D. Wempe, Power of Attorney

08/05/2016

**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 have vested.
- (2) The phantom stock units were acquired under the Issuer's Deferred Incentive Bonus Plan and settled in cash three years from the 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.

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