Capitol Federal Financial Inc Form 4

November 04, 2016

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

OMB APPROVAL

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Check this box if no longer subject to Section 16.

Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

See Instruct 1(b).

(Print or Type Responses)

(Last)

1. Name and Address of Reporting Person ** Ricketts Carlton A.

(First)

2. Issuer Name **and** Ticker or Trading Symbol

Capitol Federal Financial Inc

[CFFN]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

CADITOI EEDEDAI

(Middle)

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

11/03/2016

____ Director _____ 10% Owner ____ X__ Officer (give title _____ Other (specify

below) below)

Executive Vice President

C/O CAPITOL FEDERAL FINANCIAL, 700 KANSAS AVENUE

(Street)

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

 ${\bf 6.\ Individual\ or\ Joint/Group\ Filing} (Check$

Applicable Line)

X 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. Securit our Dispos (Instr. 3, 4	ed of (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)
CFFN common stock	11/03/2016		M	51,000	` ′	\$ 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 36,237 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)	Code	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and An Underlying Sec (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	o N o
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 <u>(2)</u>	12/31/2016	CFFN common stock	
CFFN Phantom Stock	\$ 12.56					12/31/2018(2)	12/31/2018	CFFN Phantom Stock	
CFFN phantom stock 2015	\$ 12.78					12/31/2017(2)	12/31/2017	CFFN common stock	

Reporting Owners

Reporting Owner Name / Address Relationships

Reporting Owners 2

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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.

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