

Capitol Federal Financial Inc
 Form 4
 January 05, 2016

FORM 4

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

OMB APPROVAL

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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 *
TOWNSEND KENT G

(Last) (First) (Middle)

C/O CAPITOL FEDERAL FINANCIAL, INC., 700 SOUTH KANSAS AVENUE

(Street)

TOPEKA, KS 66603

(City) (State) (Zip)

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

3. Date of Earliest Transaction (Month/Day/Year)
12/31/2015

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

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

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

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 Ownership (Instr. 4)
				(A) or (D)	Price		
CFFN common stock	12/31/2015		M	5,577	A \$ 11.69	133,832	D
CFFN common stock	12/31/2015		D	5,577	D \$ 12.56	128,255	D
CFFN common stock						70,015	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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(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)	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 Underlying Security (Instr. 3 and 4)	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title
CFFN phantom stock 2013	\$ 11.69	12/31/2015		M	5,577	12/31/2015 ⁽¹⁾	12/31/2015	CFFN common stock
CFFN Phantom Stock	\$ 12.56	12/31/2015		A	4,137	12/31/2018 ⁽¹⁾	12/31/2018	CFFN Phantom Stock
CFFN phantom stock 2015	\$ 12.78					12/31/2017	12/31/2017	CFFN common stock
CFFN Non-qualified Stock Option	\$ 11.91					⁽²⁾	05/14/2027	CFFN common stock
CFFN Incentive Stock Option	\$ 11.91					⁽³⁾	05/14/2022	CFFN common stock
CFFN Non-qualified Stock Option	\$ 14.96					⁽⁴⁾	08/23/2020	CFFN common stock
CFFN phantom stock 2014	\$ 12.11					12/31/2016 ⁽¹⁾	12/31/2016	CFFN common stock

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
			Executive Vice President	

TOWNSEND KENT G
C/O CAPITOL FEDERAL FINANCIAL, INC.
700 SOUTH KANSAS AVENUE
TOPEKA, KS 66603

Signatures

James D. Wempe, Power of
Attorney

01/05/2016

__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) 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.
- (2) 14,104 options vest on January 10, 2013, January 10, 2014, January 10, 2015 and January 10, 2016.
- (3) 8,396 options vest on January 10, 2013, January 10, 2014, January 10, 2015 and January 10, 2016.
- (4) All options are exercisable.

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.