Edgar Filing: TFS Financial CORP - Form 4

| TFS Financia Form 4 | I CORP | | | | | | | | | | |
|--|---|---|--|--|--------------------|--------------------------------|----------------|--|--|---|--|
| April 24, 200 | 1 | | | | | | | | | PPROVAL | |
| | UNITED | Washington, D.C. 20549 | | | | | | | | | |
| Check this if no long subject to Section 10 Form 4 or Form 5 obligation may conti | er STATEM 5. Filed pur ¹⁵ Section 17(a | 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 20(b) of the Investment Company Act of 1940 | | | | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | |
| 1(b). | cuon | | | | 1 5 | | | | | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| Kobak Bernard S System | | | 2. Issuer Name and Ticker or Trading Symbol TFS Financial CORP [TFSL] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/20/2007 | | | | | X Director 10% Owner X Officer (give title Other (specify below) EVP and Secretary | | | |
| | | | | endment, Date Original onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person | | | |
| CLEVELAN | ND, OH 44105 | | | | | | | Form filed by M Person | Aore than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-De | erivative S | ecurit | ies Acq | uired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | e 2A. Deemed Execution Da any (Month/Day/ | ate, if | Code | n(A) or Dis (D) | sposed 4 and 5 (A) or | of 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) | | |
| Common Stock | 04/20/2007 | | | Code V P | Amount 25,000 | (D) A | Price \$ 10 | 25,000 | I | By trust | |
| Common Stock | 04/20/2007 | | | Р | 50,000 | А | \$ 10 | 50,000 | Ι | By spouse's trust | |

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

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 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. Transactio Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 5 | ate | 7. Titl Amou Under Secur (Instr. | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|-------------------|-------|--|--|--|--|
| Reporting o wher runter runters | Director | 10% Owner | Officer | Other | | | | |
| Kobak Bernard S 7007 BROADWAY AVENUE CLEVELAND, OH 44105 | Х | | EVP and Secretary | | | | | |
| Signatures | | | | | | | | |
| /s/ Edward A. Quint, pursuant to attorney | power of | f | 04/24/2007 | | | | | |
| **Signature of Reporting Per | son | | 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).

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.