Capitol Federal Financial Inc

Form 4

January 13, 2014

Check this box

if no longer

subject to

Section 16.

Form 4 or

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

OMB Number:

3235-0287

**OMB APPROVAL** 

January 31, 2005

0.5

Estimated average

Expires:

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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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Van Houweling Tara

2. Issuer Name and Ticker or Trading Symbol

Issuer

Capitol Federal Financial Inc

(Check all applicable)

[CFFN]

(Last) (First) (Middle) 3. Date of Earliest Transaction

Director 10% Owner Other (specify

5. Relationship of Reporting Person(s) to

(Month/Day/Year)

01/10/2014

X\_ Officer (give title below) Principal Accounting Officer

C/O CAPITOL FEDERAL FINANCIAL, 700 S. KANSAS **AVENUE** 

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

**TOPEKA, KS 66603** 

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of 6. Ownership 7. Nature of Form: Direct Indirect Securities Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported

(A) Code V Amount

Transaction(s) (Instr. 3 and 4) (D) Price

**CFFN** 

common

F 01/10/2014 625 D 20,480

D

stock **CFFN** 

25,976 I **ESOP** common 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)

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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. Transaction Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
CFFN phantom stock 2012	\$ 11.54					<u>(1)</u>	12/31/2014	CFFN common stock	1,213	
CFFN phantom stock 2013	\$ 11.69					<u>(1)</u>	12/31/2015	CFFN common stock	1,359	
CFFN phantom stock 2014	\$ 12.11					<u>(1)</u>	12/31/2016	CFFN common stock	902	
CFFN Incentive Stock Option	\$ 11.91					(2)	05/14/2022	CFFN common stock	33,584	
CFFN Non-qualified Stock Option	\$ 11.91					(3)	05/14/2027	CFFN common stock	6,416	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
•	Director	10% Owner	Officer	Other			
Van Houweling Tara C/O CAPITOL FEDERAL FINANCIAL 700 S. KANSAS AVENUE TOPEKA, KS 66603			Principal Accounting Officer				

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### **Signatures**

James D. Wempe, Power of Attorney

01/13/2014

\*\*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) 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.
- (2) 8,396 options vest on January 10, 2013, January 10, 2014, January 10, 2015 and January 10, 2016.
- (3) 1,604 options vest on January 10, 2013, January 10, 2014, January 10, 2015 and January 10, 2016.

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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