### Edgar Filing: KONGS KEVIN L. - Form 4

Check this box if no longer subject to Section 16.       UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549       OMB Number         STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES       Expires Estimate burden									OMB Number: Expires: Estimated a burden hour response		
(Print or Type	Responses)										
KONGS KEVIN L. Symb				r Name <b>and</b> AR ENEF				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (	Middle)	3. Date of Earliest Transaction					k all applicable)			
				(Month/Day/Year) 01/18/2018				Director 10% Owner X_ Officer (give title Other (specify below) below) Vice President, Controller			
				lf Amendment, Date Original ed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
(City)	(State)	(Zip)	Tab	la I Non I	Dorivotivo	Soon	ritios A cau	Person uired, Disposed of,	or Bonoficial	v Ownod	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price			cquired d of (D) 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 Indirect		
Common Stock Par Value \$5.00	01/18/2018			A <u>(1)</u>	2,268	A	\$ 0	31,988 <u>(2)</u>	D		
Common Stock Par Value \$5.00	01/18/2018			F <u>(3)</u>	669	D	\$ 52.825	31,319 <u>(2)</u>	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

1

#### Edgar Filing: KONGS KEVIN L. - Form 4

# required to respond unless the form displays a currently valid OMB control number.

# 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)	4. Transactic Code (Instr. 8)	of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
KONGS KEVIN L. 818 S KANSAS AVE TOPEKA, KS 66612			Vice President, Controller				
Signatures							
Cynthia Couch by power of attorney		01/19/2018	;				
**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).

Vesting of 2,268 performance-based restricted share units that were granted on February 25, 2015, with a vesting date of January 1, 2018. Under the terms of the grant, the number of shares to be received by the Reporting Person at vesting is increased or decreased based on

- (1) the Issuer's Total Shareholder Return as compared to the Total Shareholder Return for a defined Peer Group of companies for the defined Performance Period. The determination that the performance criteria relating to the grant had been met and the calculation of the number of shares to be distributed were completed on January 18, 2018.
- (2) Includes 3,775 restricted share units that are subject to forfeiture.
- (3) Forfeiture of 669 shares for the payment of taxes upon the vesting of 2,268 performance-based restricted share units granted on 2/25/15.

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.