Edgar Filing: KROGER CO - Form 4

VDOCED CO

Form 4											
September 02, 2015 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								т			
Check this box if no longer subject to Section 16. Form 4 or Form 5 Form 5 Filed pursuant to 5			 SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, 					OMB 3235-028 Number: January 3 Expires: 200 Estimated average burden hours per response 0			
May continue. See Instruction 1(b). (Print or Type Response				lity Holdi estment C	· ·			f 1935 or Sectio 40	'n		
1. Name and Address of Reporting Person <u>*</u> Aufreiter Nora A			2. Issuer Name and Ticker or Trading Symbol KROGER CO [KR]				g	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. Date of 1 (Month/Da THE KROGER CO., 1014 VINE 09/01/20 STREET							(Check all applicable) <u>X</u> Director Officer (give title below) <u>Director</u> <u>Director</u> <u>below</u> <u>below</u> <u>below</u>				
(S	treet) 4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
CINCINNATI, O		Zin)						Form filed by M Person	More than One Re	eporting	
1.Title of 2. Tr	state) (2 ransaction Date nth/Day/Year)	Zip) 2A. Deeme Execution 1 any (Month/Da	ed Date, if	I - Non-De 3. Transaction Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D)	r)	quired, Disposed o 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	f, or Beneficial 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ly Owned 7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock								3,156	D		

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

Persons who respond to the collection of information contained in this form are not 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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. 5. Number Transaction Code Derivative (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ve es d	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5
			Code V	· (A) ((D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock - Incentive Shares	\$ 0 <u>(1)</u>	09/01/2015	А	13.4 (2)		<u>(3)</u>	(3)	Common Stock	13.4	\$ 33.

Reporting Owners

Reporting Owner Name / Address		Relationsh						
I B	Director	10% Owner	Officer	Other				
Aufreiter Nora A THE KROGER CO. 1014 VINE STREET CINCINNATI, OH 45202	Х							
Signatures								
/s/ Nora A. Aufreiter, by Stace Attorney-in-Fact		09/02/2015						
<u>**</u> Signature of Repor		Date						
Explanation of Re	spon	ses:						

* 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) Each phantom share represents the right to receive one common share upon distribution from the deferred compensation account.

(2) Represents phantom stock acquired in dividend reinvestment transactions under a deferred compensation plan of The Kroger Co.

(3) Shares of phantom stock are payable following termination of the reporting person's services as an Independent Director of Kroger.

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.