KETTIG DAVID T

Form 4

September 26, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB

OMB APPROVAL

Washington, D.C. 20549 Number:

3235-0287 January 31,

0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average

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Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

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).

Common

Stock

09/25/2017

(Print or Type Responses)

| 1. Name and Address of Reporting Person * KETTIG DAVID T | | | 2. Issuer Name and Ticker or Trading Symbol INDEPENDENCE HOLDING CO [IHC] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|---|--|---|--|--|--|---|--|--|---|
| (Last) 96 CUMMI | (First) (M | | 3. Date of (Month/Date 09/25/20 | | | | | _X_ Director _X_ Officer (give below) | | Owner er (specify |
| STAMFOR | | 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 Form filed by More than One Reporting Person | | | | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | ecuri | ties Acq | uired, Disposed o | f, or Beneficial | ly Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deem Execution any (Month/De | Date, if | 3. Transactic Code (Instr. 8) | 4. Securiti on(A) or Dis (Instr. 3, 4) | posed | of (D) | 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 Beneficial Ownership (Instr. 4) |
| Common Stock | 09/25/2017 | | | M | 38,800 | A | \$ 9.09 | 130,685 | D | |

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

 $F^{(1)}$

26,129 D

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104,556

D

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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) | ntion Date, if TransactionDerivative Code Securities | | 6. Date Exer Expiration D (Month/Day/ | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|---------|---|--------------------|---|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Option (Right to buy) | \$ 9.09 | 09/25/2017 | | M | 38,800 | (2) | 01/04/2019 | Common Stock | 38,800 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|-----------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| KETTIG DAVID T 96 CUMMINGS POINT ROAD STAMFORD, CT 06902 | X | | President & COO | | | |

Signatures

/David T.
Kettig/

**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).
- Represents a "net exercise" of a stock option. The reporting person received 12,671 shares of common stock on net exercise of option to purchase 38,800 shares of common stock. The Company withheld 26,129 shares of common stock underlying the option for payment of the exercise price and applicable taxes, based on the closing stock price on September 25, 2017 of \$25.10.
- (2) The stock option has fully vested as of the date hereof.

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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