VUJOVICH CHRISTINE M

Form 4

November 19, 2018

FORM 4

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

OMB Number: 3235-0287

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

burden hours per response... 0.5

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * VUJOVICH CHRISTINE M			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
			Kimball Electronics, Inc. [KE]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				
			(Month/Day/Year)	X Director 10% Owner			
1205 KIMBALL BOULEVARD			11/16/2018	Officer (give titleOther (specify below)			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person			
JASPER, IN	I 47546			Form filed by More than One Reporting Person			

						1 CISON			
(City)	(State) (Zip) Table			erivative Se	ecurities Acc	quired, Disposed of, or Beneficially Owned			
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. SecuritionAcquired		5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect	
(Instr. 3)	any		Code	Disposed of (D) (Instr. 3, 4 and 5)		Beneficially	(D) or Indirect (I)	Beneficial Ownership	
		(Month/Day/Year)				Owned			
		•	Code V	Amount	(A) or (D) Price	Following Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)	
Common Stock						37,839	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.

SEC 1474

(9-02)

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	2.	3. Transaction Date	3A. Deemed	4.		5. Numb	er	6. Date Exerc	cisable and	7. Title and A	Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		Transaction Derivative				Underlying Securities		Deriva	
Security	or Exercise		any	Code		Securitie	S	(Month/Day/	Year)	(Instr. 3 and	4)	Securi
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	3)	Acquired	l					(Instr.
	Derivative					(A) or						
	Security					Disposed	l of					
						(D)						
						(Instr. 3,	4,					
						and 5)						
				Code	v	(A)	(D)	Date	Expiration	Title	Amount	
				Couc	•	(21)	(2)	Exercisable	Date	11110	or	
								Excreisable	Bute		Number	
											of	
											Shares	
											Situres	
Phantom										C		
Stock	<u>(1)</u>	11/16/2018		A		3,736		(1)	(1)	Common	3,736	\$ 17
units (1)						,		_	_	Stock	,	
umus <u>~</u>												

Reporting Owners

Reporting Owner Name / Address	Relationships						
. 0	Director	10% Owner	Officer	Other			
VUJOVICH CHRISTINE M 1205 KIMBALL BOULEVARD JASPER, IN 47546	X						

Signatures

John H. Kahle, Attorney in Fact and Agent 11/19/2018

**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).

Each Phantom Stock unit is the economic equivalent of one share of common stock. Such units of Phantom Stock were acquired under the Kimball Electronics, Inc. Non-Employee Directors Stock Compensation Deferral Plan. The units of Phantom Stock become payable in common stock at the date the reporting person incurs a termination, or, if earlier, the date the reporting person dies or suffers a severe financial hardship.

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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