Edgar Filing: Hancock Brian D. - Form 4

Form 4	ian D.										
February 25	, 2019										
FORM 4 UNITED STATES SECURITIES AND EXCH						CIIA	NCEO	OMMISSION	-	OMB APPROVAL	
		DSIALES		shington,			NGE C	UNINISSIUN	OMB Number:	3235-0287	
	Check this box								Expires:	January 31,	
	if no longer subject to STATEMENT OF CHAN				NGES IN BENEFICIAL OWNERSHIP OF				Estimated average burden hours per		
Section Form 4 (Section 16.			SECURITIES							
Form 5		ursuant to	Section 1	6(a) of th	e Securi	ties E	xchang	e Act of 1934,	response	0.5	
obligation may con	ons Section 1						•	1935 or Section	1		
See Instr		30(h)	of the Ir	vestment	Compar	iy Ac	t of 194	0			
1(b).											
(Print or Type	Responses)										
1. Name and A	Address of Reportir	ng Person <u>*</u>	2. Issue	r Name and	l Ticker or	Tradii	ıg	5. Relationship of	Reporting Pers	on(s) to	
Hancock Brian D. System			Symbol	Symbol				Issuer			
			KANSA	KANSAS CITY SOUTHERN [KSU]				(Check all applicable)			
(Month/				3. Date of Earliest Transaction Month/Day/Year) 02/22/2019				Director 10% Owner X Officer (give title Other (specify			
BOX 21933		KI, I U	02/22/2	019				below)	below) ef Innovation C		
			4 70 4	1 . 5							
				. If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
			1 neu(wio	ntil/Day/Tea	.)			_X_ Form filed by O			
KANSAS (CITY, MO 6412	21-9335						Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Da			3.	4. Securi		-	5. Amount of	6.	7. Nature of	
Security (Instr. 3)	any		n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Securities Beneficially	Ownership Form: Direct	Indirect Beneficial	
(Insu: 5)			Day/Year) (Instr. 8)			Owned	(D) or	Ownership			
								Following Reported	Indirect (I) (Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)	(1130. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	02/22/2019			F	3,314	D	\$ 111.75	23,982	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)

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secu (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (Right to Buy)	\$ 82.71					<u>(1)</u>	02/18/2026	Common Stock	4,648	
Employee Stock Option (Right to Buy)	\$ 86.89					<u>(2)</u>	02/16/2027	Common Stock	6,552	
Employee Stock Option (Right to Buy)	\$ 105.83					(2)	03/05/2028	Common Stock	6,355	

Edgar Filing: Hancock Brian D. - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Hancock Brian D. KANSAS CITY SOUTHERN PO BOX 219335 KANSAS CITY, MO 64121-9335			EVP & Chief Innovation Officer					
Signatures								
Julie D. Powell, Attorney-in-fact	02/25/2019							

<u>**</u>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) These options become exercisable in two equal installments beginning on the second anniversary of the date of grant.
- (2) These options become exercisable in three equal installments beginning on the first anniversary of the date of grant.

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.