Edgar Filing: DeLorenzo Jessica L - Form 4

DeLorenzo J	essica L										
Form 4 August 22, 2	018										
									OMB APPROVAL		
FORM		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB 3235-0287 Number: January 31, Expires: 2005 Estimated average burden hours per response 0.5			
Check th if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed p ns inue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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									
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> DeLorenzo Jessica L			2. Issuer Name and Ticker or Trading Symbol Kimball Electronics, Inc. [KE]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check								
(Mo 1205 KIMBALL BOULEVARD (Street) 4. If File			(Month/Day/Year) 08/20/2018					Director 10% Owner X_ Officer (give title Other (specify below) Vice President 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting			
				If Amendment, Date Original led(Month/Day/Year)							
JASPER, IN	V 47546							Person	lore than One Ke	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deem Execution any (Month/Da		on Date, if	a Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Pay/Year) (Instr. 8) (A)				Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	08/20/2018			А	948 <u>(1)</u>	А	\$0	1,105	D		
Common Stock	08/20/2018			F(2)	322	D	\$ 19.85	783	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.

Edgar Filing: DeLorenzo Jessica L - Form 4

 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
hepotong o whet there i there as	Director	10% Owner	Officer	Other				
DeLorenzo Jessica L 1205 KIMBALL BOULEVARD JASPER, IN 47546			Vice Presiden	ıt				
Signatures								
Jyl Leinenbach, Attorney in Fact a Agent	and	08/22/2018						
**Signature of Reporting Person		Dat	e					

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).

Reflects performance based shares granted pursuant to the Issuer's 2014 Stock Option and Incentive Plan upon the achievement of certain
 (1) performance criteria certified by the Compensation and Governance Committee of the Board of Directors of the Issuer on July 31, 2018, subject to the Reporting Person's continued employment with the Issuer on the August 20, 2018 grant date set by the Committee.

(2) Shares withheld to satisfy tax obligations.

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.