Edgar Filing: STENSKE DOUGLAS E - Form 4

Form 4	DOUGLAS E											
May 16, 2011 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB APPROVAL OMB 3235-0287 Number:			
Check t if no lot subject Section Form 4 Form 5 obligati may con <i>See</i> Inst 1(b).	ursuant to S 7(a) of the 3	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Sectior of the Investment Company Act of 1940							January 31, 2005 Estimated average burden hours per response 0.5			
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> STENSKE DOUGLAS E			2. Issuel I tame and Trenet of Trading					I	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) M/S 124-318, 400 COLLINS ROAD NE								(Check all applicable) Director 10% Owner XOfficer (give title Other (specify below) VP & Treasurer				
CEDAR R	Filed(Month/Day/Year) Ar					. Individual or Joint/Group Filing(Check pplicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting erson						
(City)	(State)	(Zip)	Tal	ble I - Non	1-Deri	ivative Sec	urities		red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Month/Day/Year) 2. Transaction Date 2A. Deemed Execution Date, any (Month/Day/Ye			Date, if	ate, if TransactiorDisposed of (D) Code (Instr. 3, 4 and 5) /Year) (Instr. 8) (A)					 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) 	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	05/12/2011			Code V I		Amount 67.5673	or (D) D	Price \$ 63.55	0	I	By Savings Plan	
Common Stock									2,894.594 (2)	D		

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

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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)	4. Transacti Code (Instr. 8)	5. Number of orDerivative 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)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock Share Equivalents	\$ 63.55	05/12/2011		Ι		62.0142	<u>(4)</u>	<u>(4)</u>	Common Stock	62.0142 (5)

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting O when Plante, Plantess	Director	10% Owner	Officer	Other				
STENSKE DOUGLAS E M/S 124-318 400 COLLINS ROAD NE CEDAR RAPIDS, IA 52498-0001			VP & Treasurer					
Signatures								
Gary R. Chadick,	05/1	6/2011						

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) Shares represented by Company stock fund units under the Company's tax-qualified savings plan, including shares acquired on a periodic basis pursuant to the Plan, based on information furnished by the Plan Administrator.
- (2) Includes shares acquired under the Company's employee stock purchase plan and based on information furnished by the Plan Administrator as of March 17, 2011.
- (3) Share equivalents represented by Company stock fund units credited under the Company's non-qualified savings plan based on information furnished by the Administrator of the Plan.
- (4) Payable in cash upon termination of employment.
- The number of share equivalents represented by the balance of a participant's Company stock fund may vary from day to day due to(5) variances in the proportion of uninvested cash held in the reference fund used to determine unit values of the Company stock fund under the supplemental plan.

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.

Attorney-in-Fact

**Signature of Reporting Person