## Edgar Filing: KROGER CO - Form 4

KROGER C	CO											
Form 4												
September 1	6, 2014											
FORM	14								OMB AF	PPROVAL		
	UNITED	STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287		
Check th									Expires:	January 31,		
if no lon subject t	- NIATHA	AENT OI	F CHAN	GES IN	GES IN BENEFICIAL OWNERSHIP				•	2005		
	Section 16.				SECURITIES					Estimated average burden hours per		
Form 4 o									response 0.			
Form 5 obligatio							•	e Act of 1934,				
may con				•	•	· ·	•	f 1935 or Section	1			
See Instr	ruction	30(h)	of the In	ivestment	Compar	iy Ac	t of 194	10				
1(b).												
(Print or Type	Responses)											
(												
1. Name and A	Address of Reporting	Person <sup>*</sup>	2. Issue	r Name <b>and</b>	I Ticker or	Tradi	ng	5. Relationship of	Reporting Pers	son(s) to		
Tuffin Mark C Symbol								Issuer				
				GER CO [KR]								
			of Earliest Transaction				(Check all applicable)					
(Lust)	(1130) (1	(induic)		nth/Day/Year)				Director 10% Owner				
				15/2014				Officer (give	title Other (specify			
STREET	,		0,,10,1	011				below)	below) Vice Presiden	t		
						_						
	(Street)			Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon				Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
CINCINNA	ATI, OH 45202							Form filed by M				
chitehitu	111, 011 45202							Person				
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date		ned	3.	4. Securi			5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Executior any	n Date, if	Transactio				Securities	Ownership	Indirect		
(Instr. 3)		Code(Instr. 3, 4 and 5)Day/Year)(Instr. 8)				5)	Beneficially Owned	Form: Direct (D) or	Beneficial Ownership			
		(WIOIIII/L	ay/1cal)	(11150.0)				Following	Indirect (I)	(Instr. 4)		
						(A)		Reported	(Instr. 4)			
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	09/15/2014			F	591 <u>(1)</u>	D	\$	67,880.3797	D			
Stock	071012014			1	<u> </u>	D	51.55	(2)	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)

## Edgar Filing: KROGER CO - Form 4

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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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							
	Director	10% Owner	Officer	Other				
Tuffin Mark C THE KROGER CO. 1014 VINE STREET CINCINNATI, OH 45202			Senior Vice President					
Signatures								
/s/ Mark C. Tuffin, by Stacey M Attorney-in-Fact	1. Heiser,		09/16/2014					
<u>**</u> Signature of Reportir	ng 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) Payment of tax liability associated with restricted stock.
- (2) The total amount of securities directly owned by the reporting person includes shares in the Company's employee benefit plans that are deemed to be 'tax-conditioned plans' pursuant to Rule 16b-3, to the extent disclosed on reports received from plan trustees.

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.