Edgar Filing: LUBYS INC - Form 4

| LUBYS INC Form 4 October 04, 2 | | | | | | | | | | | |
|--|---|--|--|-------------------|--|--|---|---|------------------------|--|--|
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | OMB APPROVAL | | | | |
| Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | |
| Check this if no long subject to Section 10 | er STATEMI | ENT OF CHAN | CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Expires: January 31, 2005 Estimated average burden hours per | | | |
| Form 4 or | • | | | | | | | response | 0.5 | | |
| Form 5 obligations may continue. See Instruction 1(b). 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 R | esponses) | | | | | | | | | | |
| 1. Name and Ad JENKINS J | Name and Ticker or Trading INC [LUB] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | | |
| (Last) | (First) (Mi | | - | - | | | (Check all applicable) | | | | |
| | | | of Earliest Transaction Day/Year) 2016 | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | | |
| | (Street) 4. If Amer Filed(Mont | | | | | | 6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person | | | | |
| HOUSTON, | | Fo Person | | | | Form filed by More than One Reporting rson | | | | | |
| (City) | (State) (Z | Zip) Tab | le I - Non-D | erivative S | Securi | ties Acq | uired, Disposed of | , or Beneficial | ly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, it any (Month/Day/Year | Code) (Instr. 8) | on(A) or D (D) | ispose 4 and (A) or | d of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect Beneficial | | |
| Restricted Stock | 10/01/2016 | | А | 2,300 (1) | A | \$ 4.24 (1) | 93,055 | 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)

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| 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. Transactic Code (Instr. 8) | Securities Acquired (A) or Disposed | | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans | |
|---|---|---|---|--|--|---------------------|--------------------|---|---|---|--------|
| | | | | | of (D) (Instr. 3, 4, and 5) | | | | | | (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

JENKINS J S B 13111 NORTHWEST FREEWAY SUITE 600 HOUSTON, TX 77040

Signatures

/s/ J.S.B. Jenkins 10/04/2016

**0:----

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<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) The security fully vests at time granted and remains subject to a restriction on alienation until the earlier of 10/01/2019 or the date of the director's resignation or retirement.

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.