Edgar Filing: WOJTOWICZ JEAN L - Form 4

WOJTOWI	CZ JEAN L									
Form 4										
January 03,								0145.4		
FORM	$\mathbf{\Lambda} 4_{\text{UNITED}}$	STATES	SECU	DITIFS /	ND FY	CHANCI	E COMMISSION	Т	PPROVAL	
	UNITED	SIAILS		shington				Number:	3235-0287	
Check t	his box		***	isinington	, D.C. 20	JJ - J			January 31,	
if no lo		MENT OI	F CHAI	NGES IN	BENEF	Expires:	2005			
subject Section				SECUE	RITIES	Estimated burden hou	•			
Form 4	or							response	•	
Form 5 obligati							inge Act of 1934,			
may con				•	•	· ·	t of 1935 or Section	on		
See Inst	ruction	30(h)	of the I	nvestment	Compai	ny Act of	1940			
1(b).										
(Print or Type	Responses)									
1. Name and	Address of Reporting	Person <u>*</u>	2. Issue	er Name an o	d Ticker of	Trading	5. Relationship o	of Reporting Per	rson(s) to	
WOJTOWICZ JEAN L Sy							Issuer			
			VECT	REN COF	RP [VVC	[]	(Check all applicable)			
(Last)	(First) ((Middle)	3. Date of Earliest Transaction							
			-	Month/Day/Year)			Director 10% Owner			
			01/02/2	2019			Officer (give titleOther (specify below) below)			
(Street)			4. If Am	endment, D	ate Origina	al	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
			Filed(Mo	onth/Day/Yea	r)					
EVANSVI										
(City)	(State)	(Zip)	Tat	ole I - Non-l	Derivative	Securities A	Acquired, Disposed of	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date			3. Tron et in	4. Securit			6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution any	Date, 11	Transactio Code	Disposed			Form: Direct (D) or Indirect	Indirect Beneficial	
((Month/Day/Year)		(Instr. 8) (Instr. 3, 4 and 5)			Owned (1	(I)	Ownership	
							Following Reported	(Instr. 4)	(Instr. 4)	
						(A)	Transaction(s)			
				Code V	Amount	or (D) Price	(Instr. 3 and 4)			
D										
Reminder: Re	eport on a separate line	e for each cl	ass of sec	urities bene	-	-	-	ation of	NEC 1474	
					inforr	nation con	spond to the collect tained in this form	are not	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orDerivative	Expiration Date	Underlying Securities]
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	

number.

displays a currently valid OMB control

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	ĺ	Acquired (A Disposed o (Instr. 3, 4, 5)	f (D)				()
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock	\$ 0	01/02/2019		J <u>(1)</u>		91.2471		(2)	(2)	Common Stock	91.2471

Reporting Owners

Reporting Owner Name / Addres	SS	Relationships							
	Director	10% Owner	Officer	Other					
WOJTOWICZ JEAN L ONE VECTREN SQUARE P. O. BOX 209 EVANSVILLE, IN 47708									
Signatures									
/s/Ronald E. Christian	01/03/2019								

**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).
- Exempt acquisition of phantom shares acquired through Vectren Corporation (Vectren) Non-Qualified Deferred Compensation Plan (1) (Plan). These transactions are exempt under Section16b-3.

Phantom stock units held under the non-qualified deferred compensation plan will effectively be exercised at the time the amounts represented by those units are paid out under the Plan. Generally, unless provided otherwise by the participant, the payout begins with the

(2) end of the board member's service as a member of the board. Pursuant to the non-qualified deferred compensation plan, payouts can occur for up to 15 years. Amounts held in the phantom stock accounts would be amortized over that period unless directed otherwise by the participant.

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.