Edgar Filing: DAVIS JEFFREY S - Form 4

DAVIS JEF	FREY S										
Form 4											
May 02, 201											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB											
	UNITED	STATES		shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th				·····B·····	200120				Expires:	January 31,	
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									2005		
•	subject to STATEMENT OF CHAR								Estimated average burden hours per		
Form 4									response	0.5	
Form 5 obligation							•	e Act of 1934,			
may con				•	•	· ·		1935 or Sectior	1		
See Inst	ruction	30(h)	of the In	vestment	Compan	y Aci	t of 194	0			
1(b).											
(Print or Type Responses)											
1. Name and	Address of Reporting 1	Person *	2 Issue	r Name and	l Ticker or	Tradir	ισ	5. Relationship of	Reporting Pers	on(s) to	
DAVIS JEI		-	Symbol	i i tuille uil e		Inddin	.9	Issuer			
			-	CIENT IN	IC [PRF]]		(Check all applicable)			
(Last)	(First) (M	Middle)	3. Date of Earliest Transaction (Check						(all applicable)		
			(Month/E	Day/Year)				Director 10% Owner			
555 MARYVILLE UNIVERSITY 04/30/2				/2019				XOfficer (give titleOther (specify below) below)			
DR, SUITE 500 Chairman and CEO											
(Street) 4. If				If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
				nth/Day/Year)				Applicable Line)			
_X_Form filed by One Reporting Person Form filed by More than One Reporting											
ST LOUIS,	MO 63141							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date (Month/Day/Year)			3.	4. Securit		•	5. Amount of	6.	7. Nature of	
Security (Instr. 3)	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Securities Beneficially	Ownership Form: Direct	Indirect Beneficial			
(11541-0)						Owned	(D) or	Ownership			
								Following Reported	Indirect (I)	(Instr. 4)	
						(A)		Transaction(s)	(Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	04/20/2010						\$	522 200	D		
Stock	04/30/2019			S <u>(1)</u>	900	D	29.62	532,389	D		
Common							\$				
Stock	05/02/2019			S <u>(1)</u>	77,396	D	[©] 30.44	454,993	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.

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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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	unt 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						
		Director	10% Owner	Officer	Other			
DAVIS JEFFREY S 555 MARYVILLE UNIVERSITY DR SUITE 500 ST LOUIS, MO 63141				Chairman and CEO				
Signatures								
Jeffrey Davis	05/02/2019							

<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) Shares were sold pursuant to shareholder's 10b5-1 trading plan adopted by owner on 12/6/2018 with an effective date of 12/6/2018.

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.