## Edgar Filing: KEPLER DAVID E - Form 4

KEPLER DA	VID E										
Form 4											
May 02, 2019	)										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer							Expires:	January 31, 2005			
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNER						NERSHIP OF	Estimated a	Estimated average			
	Section 16. SECURIT						burden hou	burden hours per			
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							0.5		
obligation	~ ^						of 1935 or Sectio	m			
may contin	nue.		the Investmer	•	- ·			11			
See Instruction 1(b).	ction	50(11) 01	the investmen	n compan	y mei	. 01 1 )	-10				
1(0).											
(Print or Type R	esponses)										
							Reporting Person(s) to				
KEPLER DA	AVID E	Syı	mbol				Issuer				
	ERADATA C	ORP /DE/	[TD	C]	(Check all applicable)						
(Last) (First) (Middle) 3. Date of				Transaction			(Check an approache)				
(Month/D							_X_Director10% Owner				
17095 VIA DEL CAMPO			/30/2019				Officer (give title     Other (specify below)				
(Street) 4. If Amer			If Amendment, I	Date Original			6. Individual or Jo	oint/Group Filin	Group Filing(Check		
Filed(Mont				ear)			Applicable Line)				
Form file							y One Reporting Person More than One Reporting				
SAN DIEGC	), CA 92127						Person		1 0		
(City)	(State)	(Zip)	Table I - Non	-Derivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date		tion Date, if TransactionAcquired (A) or Code Disposed of (D)				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial Ownership			
(Instr. 5)		any (Month/Day				Owned	Indirect (I)				
						Following	(Instr. 4)	(Instr. 4)			
					(A)		Reported Transaction(s)				
					or		(Instr. 3 and 4)				
Common			Code	V Amount	(D)	Price					
Common Stock	04/30/2019		А	5,628	А	\$ 0 (1)	85,594	D			
STOCK						<u> </u>					

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	2. Conversion	3. Transaction Date		4. Transact	5.		6. Date Exerc		7. Title		8. Price of	9. Nu Doriy
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	(Instr. 8)	of Deriva Securi Acqui (A) or Dispo of (D) (Instr.	nNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	' (A) (	` '	Date Exercisable	Expiration Date		Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>								
	Director	10% Owner	Officer	Other				
KEPLER DAVID E 17095 VIA DEL CAMPO SAN DIEGO, CA 92127	Х							
Signatures								
Margaret A. Treese, Attorney-i Kepler	05/01/2019							
**Signature of Reportin		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) Award of restricted share units issued under the Director Compensation Program. The units vest in four equal, quarterly installments commencing three months after the grant date.

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.