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KANSAS CI Form 4 March 15, 20	TY SOUTHER	N									
									OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check thi if no long subject to Section 1	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: Estimated a burden hou	ed average				
Form 4 or Form 5 obligation may cont <i>See</i> Instru 1(b).	Filed pu ns Section 17	(a) of the		ility Hold	ling Com	pany	Acto	ge Act of 1934, f 1935 or Sectio 40	response	0.5	
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> Brook James S			2. Issuer Name and Ticker or Trading Symbol				-	5. Relationship of Reporting Person(s) to Issuer			
(Lest)	(First)	(Middle)	KANSAS CITY SOUTHERN [KSU] 3. Date of Earliest Transaction (Chec					ek all applicable)			
(Last) KANSAS C BOX 21933	ITY SOUTHER	. ,	(Month/Da 03/14/20	ay/Year)	ansaction			Director X_Officer (give below) Vice Pres		o Owner er (specify roller	
				. If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
KANSAS C	ITY, MO 64121	1-9335						Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execution any	emed on Date, if /Day/Year)	Code	4. Securi onAcquirec Disposec (Instr. 3,	l (A) c l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	03/14/2005			Code V A	Amount 8,000	(D) A	Price \$ 0	10,500	D		
Stock	03/1-12003			Α	0,000	Π	ψυ	10,500	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)

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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. F Dei Sec (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (right to buy) (1)	\$ 14.77					09/28/2005	09/27/2014	Common Stock	20,000	
LSAR (1)	\$ 14.77					<u>(1)</u>	(1)	Common Stock	20,000	
Employee Stock Option (right to buy) (1)	\$ 14.77					09/28/2009	09/27/2014	Common Stock	5,000	
LSAR (1)	\$ 14.77					(1)	(1)	Common Stock	5,000	
Employee Stock Option (right to buy) (1)	\$ 16.59					11/04/2005	11/03/2014	Common Stock	20,000	
LSAR (1)	\$ 16.59					(1)	(1)	Common Stock	20,000	

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Reporting Owners

Reporting Owner Name / Address	Relationships						
Fg	Director	10% Owner	Officer	Other			
Brook James S							
KANSAS CITY SOUTHERN			Vice President				
PO BOX 219335			& Comptroller				
KANSAS CITY, MO 64121-9335							

Signatures

Jay M. Nadlman, 03/15/2005 Attorney-in-fact

**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).
- Limited Stock Appreciation Rights ("LSARs") are granted in tandem with stock options. LSARs become exercisable only following a (1) change-in-control of the Company in lieu of related options and are exercisable only for cash. LSARs terminate when the related options are exercised or terminated.

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.