Edgar Filing: OLIVER THOMAS W - Form 4

OLIVER TH	OMAS W									
Form 4 May 04, 2005	Ţ									
.									OMB A	PPROVAL
FORM	UNITE	D STATES		ITIES AN hington, 1			GE (COMMISSION		3235-0287
Check this box if no longer subject to Section 16. SECURITIES SECURITIES					Expires: Estimated a burden hou response	irs per				
(Print or Type R	esponses)									
1. Name and Ac OLIVER TH	ddress of Reporti IOMAS W	ng Person <u>*</u>	Symbol	Name and '		-	r,	5. Relationship of Issuer (Cheo	f Reporting Per ck all applicable	
(Last) 4441 W. AIF	(First) RPORT FREE	(Middle) EWAY	3. Date of (Month/Da 05/02/20	-	nsaction			below)	title $\frac{10\%}{\text{below}}$ title $\frac{10\%}{\text{below}}$ P of Subsidiary	
				nendment, Date Original Ionth/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
IRVING, TX	X 75062							Form filed by M Person	More than One Re	eporting
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurit	ies Ac	quired, Disposed o	f, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction 1 (Month/Day/Ye	ear) Executio any	on Date, if	3. Transactio Code (Instr. 8)	Disposed	(A) or of (D)	1	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, Par Value \$.10				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	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)

Edgar Filing: OLIVER THOM	AS W - Form 4
---------------------------	---------------

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. Transacti Code (Instr. 8)	Securit	ivative ties red sed of	6. Date Exerc Expiration D (Month/Day/	ate	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option	\$ 15.5						<u>(1)</u>	03/07/2007	Common Stock	11,286
Employee Stock Option	\$ 22.6667						(2)	01/05/2008	Common Stock	75,000
Employee Stock Option	\$ 29						(3)	01/03/2009	Common Stock	15,000
Employee Stock Option	\$ 19.9933						(4)	01/13/2010	Common Stock	150,000
Employee Stock Option	\$ 36.66						(5)	03/04/2010	Common Stock	15,800
Employee Stock Option	\$ 15.5	05/02/2005		D	5	5,000	<u>(1)</u>	03/07/2007	Common Stock	5,000

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Officer Other				
OLIVER THOMAS W 4441 W. AIRPORT FREEWAY IRVING, TX 75062				EVP of Subsidiary				
Signaturos								

Signatures

Thomas W.	05/04/2005				
Oliver	05/04/2005				

<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) Vesting Schedule: 50% after 03/07/01; 75% after 03/07/02; and 100% after 03/07/03.
- (2) Vesting Schedule: 50% after 01/05/03; 75% after 01/05/04; and 100% after 01/05/05.
- (3) Vesting Schedule: 50% after 01/03/04; 75% after 01/03/05; and 100% after 01/03/06.
- (4) Vesting Schedule: 33% after 01/13/04; 66% after 01/13/05; and 100% after 01/13/06.
- (5) Vesting Schedule: 25% after 03/04/06; 50% after 03/04/07; 75% after 03/04/08; and 100% after 03/04/09.

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.