Edgar Filing: Cochrane John H. - Form 4

| Cochrane Joh Form 4 | | | | | | | | | | | |
|--|---|--|---|--|---|--------------------------------------|--------------------------------|---|--|---|--|
| March 15, 20 FORM Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b). | 4 UNITED S box or STATEM 5. Filed purst Section 17(a) | ENT OF uant to So) of the P | Was CHANG ection 16 bublic Uti | hington, GES IN I SECURI | D.C. 205 BENEFI TIES Securiti ing Com | 5 49 CIAI es Ex pany | L OW tchang Act o | COMMISSION NERSHIP OF ge Act of 1934, f 1935 or Sectio 40 | OMB Number: Expires: Estimated a burden hou response | rs per | |
| (Print or Type Ro | esponses) | | | | | | | | | | |
| Cochrane John H. Symbol Kaiser J | | | Symbol | r Name and Ticker or Trading Federal Financial Group, Inc. | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) (First) (Middle) 3. | | | 3. Date of Earliest Transaction(Month/Day/Year)03/13/2012 | | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| | | | | Amendment, Date Original I(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| COVINA, CA | A 91724 | | | | | | | Form filed by M Person | More than One Re | eporting | |
| (City) | (State) (Z | Zip) | Table | e I - Non-De | erivative S | ecuri | ties Ace | quired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deen Execution any (Month/D | n Date, if | 3. Transactic Code (Instr. 8) Code V | Disposed (Instr. 3, Amount | (A) o of (D |) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 03/13/2012 | | | А | 1,083 (1) | А | \$0 | 1,183 | 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)

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| 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) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | (Month/Day/Year) ive ies ed | | 7. Titl Amou Under Secur (Instr. | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|--|--------------------------------------|--------------------|--|--|---|--|
| | | | | Code V | 4, and 5) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| I O | Director | 10% Owner | Officer | Other | | | |
| Cochrane John H. 1359 N. GRAND AVENUE COVINA, CA 91724 | Х | | | | | | |
| Signatures | | | | | | | |
| /s/ Jean Carandang, Pursuant to Attorney | 03/15/2012 | | | | | | |
| <u>**</u> Signature of Reporting Pe | 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 of restricted stock vest 100% on March 13, 2013.

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.