

KROGER CO  
Form 3  
May 27, 2014

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Wheatley Christine S		(Month/Day/Year)	KROGER CO [KR]	
(Last)	(First)	(Middle)	05/23/2014	
THE KROGER CO.,		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)
1014 VINE STREET				
(Street)				
CINCINNATI, OH				
45202				
(City)	(State)	(Zip)		

(Check all applicable)

<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other	
(give title below) (specify below)		

Group Vice President

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	9,131	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Non-Qualified Stock Option	Â (1)	03/13/2018	Common Stock	1,000	\$ 25	D	Â
Non-Qualified Stock Option	Â (2)	06/25/2019	Common Stock	750	\$ 22.34	D	Â
Non-Qualified Stock Option	Â (2)	06/24/2020	Common Stock	1,250	\$ 20.16	D	Â
Non-Qualified Stock Option	Â (2)	06/24/2020	Common Stock	750	\$ 20.16	D	Â
Non-Qualified Stock Option	Â (2)	06/23/2021	Common Stock	2,000	\$ 24.74	D	Â
Non-Qualified Stock Option	Â (2)	07/12/2022	Common Stock	4,000	\$ 21.96	D	Â
Non-Qualified Stock Option	Â (2)	12/06/2022	Common Stock	2,000	\$ 26.9	D	Â
Non-Qualified Stock Option	Â (2)	07/15/2023	Common Stock	6,000	\$ 37.76	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Wheatley Christine S THE KROGER CO. 1014 VINE STREET CINCINNATI, OH 45202	Â	Â	Â Group Vice President	Â

## Signatures

/s/ Christine S. Wheatley 05/27/2014

\*\*Signature of Reporting Person Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 5(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).

These options were granted under an option plan of The Kroger Co. and vest in equal annual installments in whole share amounts over a (1) three-year period, at the rate of one-third per year commencing one year after the date of grant, with the remainder vesting three years from the date of grant.

(2) These options were granted under a long-term incentive plan of The Kroger Co. and vest in equal annual installments in whole amounts over a five-year period, at the rate of 20% per year commencing one year from the date of the grant.

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.