## Edgar Filing: Gann John W Jr - Form 4

\*\*\*

Gann John V Form 4											
FORN	<b>4</b> UNITED S	STATES S		ITIES A hington,			NGE C	OMMISSION	OMB AF OMB Number:	PPROVAL 3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). StateMent of CHANGES IN 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								Expires: January 31, 2005 Estimated average burden hours per response 0.5			
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Gann John W Jr			2. Issuer Name <b>and</b> Ticker or Trading Symbol HollyFrontier Corp [HFC]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(			3. Date of Earliest Transaction (Month/Day/Year) 12/17/2018					Director 10% Owner X Officer (give title Other (specify below) below) VP, Controller & CAO			
				Amendment, Date Original d(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
(City)		(Zip)	Tabl	I Non D	anivativa	Same	iting A ag	Person	on Donoficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution 1 any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8)	4. Securities Acquired n(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or			uired, Disposed of 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	
Common Stock	12/17/2018			Code V A	Amount 2,378 (1)	(D) A	Price \$ 0	31,249	D		
Common Stock	12/17/2018			F	580 <u>(2)</u>	D	\$ 52.68	30,669	D		
Common Stock	12/17/2018			F	2,047 (3)	D	\$ 52.68	28,622	D		
Common Stock								3,203.04	Ι	By 401(k)	

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. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans
					of (D) (Instr. 3, 4, and 5)						(Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Gann John W Jr 2828 N. HARWOOD, STE 1300 DALLAS, TX 75201			VP, Controller & CAO					
Signatures								
Vaishali S. Bhatia,	12	2/19/2018						

Attorney-in-Fact
<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) These shares were deemed issued to the reporting person to settle performance share units that were not derivative securities under the Company's Long-Term Incentive Compensation Plan.
- (2) These shares were deemed surrendered to satisfy the reporting person's tax liability incident to the issuance of the shares reported on the preceding line.
- (3) These shares were deemed surrendered to satisfy the reporting person's tax liability incident to the vesting of restricted share and restricted stock units grants previously reported.

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.