## Edgar Filing: COEL KEVIN S - Form 4

| COEL KEV<br>Form 4   |   |  |   |                    |   |                        |  |                |  |   |   |  |
|--|---|--|---|--------------------|---|------------------------|--|----------------|--|---|---|--|
| February 0 <sup>o</sup>  | ЛЛ                                      | ) STATES                                     | SECU  | RITIES             | AND EX                                    | сна                    | NGF  |                | IMISSION   | OMB AP  | PROVAL  |  |
| Washingto  |   |  |   |                    | S AND EXCHANGE COMMISSI<br>on, D.C. 20549 |                        |  |                |  | OMB<br>Number:  | 3235-0287   |  |
| Subject to<br>Section 16.<br>Form 4 or                           |   |  | F CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES<br>Section 16(a) of the Securities Exchange Act of 1934, |                    |   |                        |  |                |  | Expires: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5 |   |  |
| obligat<br>may co  | ions Section 17                         | (a) of the                                   | Public I  | Utility Ho         |   | mpan                   | y Act  | of 193         | 35 or Section  |   |   |  |
| (Print or Type   | e Responses)                            |  |   |                    |   |                        |  |                |  |   |   |  |
| 1. Name and Address of Reporting Person <u>*</u><br>COEL KEVIN S |   |  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>CNF INC [CNF]                                      |                    |   |                        |  |                | . Relationship of Reporting Person(s) to ssuer   |   |   |  |
| (Last)   | (First)                                 | (Middle)                                     | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>02/04/2005   |                    |   |                        |  | belo           | (Check all applicable)<br>Director 10% Owner<br>Officer (give title X_ Other (specify<br>below)<br>VP & Controller |   |   |  |
|  | Filed(Month/Day/Year)                   |  |   |                    |   | App<br>_X_             | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person<br>Form filed by More than One Reporting<br>Person |                |  |   |   |  |
| (City)   | (State)                                 | (Zip)  | Ta  | ble I - Non        | -Derivativ                                | e Secui                | rities A   | Acquire        | d, Disposed of,  | or Beneficially   | Owned   |  |
| 1.Title of<br>Security<br>(Instr. 3)                             | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deeme<br>Execution I<br>any<br>(Month/Da | Date, if  | Code<br>(Instr. 8) | 4. Securit<br>orDisposed<br>(Instr. 3, 4  | of (D)<br>and 5)<br>(A | )<br>.)  | (A) or         | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Common<br>Stock  | 02/04/2005                              |  |   | Code V<br>S        | Amoun<br>215.193                          |                        | \$   | Price<br>.4698 | 887.864  | I   | by<br>401(k)  |  |
| Reminder: R  | eport on a separate lir                 | ne for each cl                               | ass of sec  | curities ber       | eficially ov                              | vned di                | rectly   | or indire      | ectly.   |   | 0.1474  |  |

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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>ofNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| Reporting Owner Name / Address         | Relationships |            |         |                 |  |  |  |  |
|--|---------------|------------|---------|-----------------|--|--|--|--|
|  | Director      | 10% Owner  | Officer | Other           |  |  |  |  |
| COEL KEVIN S                           |               |            |         |                 |  |  |  |  |
|  |               |            |         | VP & Controller |  |  |  |  |
| Signatures                             |               |            |         |                 |  |  |  |  |
| By: Gary S. Cullen, Attorney-i<br>Coel | r: Kevin S.   | 02/07/2005 |         |                 |  |  |  |  |
| **Signature of Reportin                |               | 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).

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.