THOMAS DENNIS

Form 4

February 21, 2019

FORM 4

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

OMB Number:

Expires:

3235-0287 January 31,

2005

0.5

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average

OMB APPROVAL

burden hours per response...

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * THOMAS DENNIS			2. Issuer Name and Ticker or Trading Symbol FIRST CAPITAL INC [FCAP]					5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)				
(Lust) (Trist) (Middle)			(Month/Day/Year)					Director 10% Owner				
220 FEDERAL DRIVE			02/19/2019					X Officer (give title Other (specify				
			0=/1//=0	, 1,				below) Seni	below) or Vice Presider	nt		
	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check						
F				Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person			
CORYDON, IN 47112								Form filed by More than One Reporting Person				
(City)	(Chata) (77:m)									lly Owned		
	Table 1 - Non-Derivative Securities Acquired, Disposed of, of Beneficiary Owned											
1.Title of	2. Transaction Date 2A. Do		emed on Date, if	3. 4. Securities				5. Amount of Securities	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Security (Instr. 3)	(Month/Day/Yea	any	on Date, ii	TransactionAcquired (A) or Code Disposed of (D)			Beneficially					
(msu. 5)			/Day/Year)	ay/Year) (Instr. 8) (Instr. 3, 4 and 5)		Owned Following	Indirect (I) (Instr. 4)					
					(A)		Reported					
						or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	02/19/2019			A	750	A	\$0	8,385	D			
Common								1,886	I	D. ECOD		
Stock								1,000	1	By ESOP		
Common Stock								609	I	By Spouse		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.												
Kenimuer, Kept	ar on a separate in	ic for cacif c	1435 01 50001	incs benefit	Jany Own	ca un	ctry or	muncetry.				

SEC 1474 Persons who respond to the collection of information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control

Edgar Filing: THOMAS DENNIS - Form 4

number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date		Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						Ì
					4, and 5)						
					,						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	(Number		
						2.10101541010			of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

THOMAS DENNIS 220 FEDERAL DRIVE CORYDON, IN 47112

Senior Vice President

Signatures

/s/ William Harrod, by power of attorney

02/21/2019

**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).

Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

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.

Reporting Owners 2