Edgar Filing: TAYLOR ROBERT LEWIS - Form 4

	ROBERT LEWIS	5										
Form 4	2007											
January 27,												
FORM	\mathbf{M} 4 UNITED) STATES	SFCU	DITIES		усн	ANCE	COMMISSI	ON		PPROVA	Ĺ
	UNITED	SIAILS		ashingtoi				COMMISSIO	U.	MB umber:	3235-	0287
Check	this box		••	asiningtoi	I, D.C. 1	2004.			-		Januar	y 31,
if no lo	- NIATH	MENT OI	F CHA	NGES IN	I BENE	FIC	AL OV	VNERSHIP C)F	pires:	1	2005
subject Section	10				RITIES				Es	stimated a	•	
Form 4										ırden hou sponse	•	0.5
Form 5	rincu pu	irsuant to S	Section	16(a) of t	he Secu	rities	Exchar	nge Act of 193-				
obligati may co		(a) of the	Public	Utility Ho	lding C	ompa	ny Act	of 1935 or Sec	tion			
See Inst		30(h)	of the]	Investmer	nt Comp	any A	Act of 1	940				
1(b).												
(Print or Type	e Responses)											
1 Name and	Address of Deporting	a Darson *	0 T		1	-		5 Deletionshi	n of Don	orting Dar	on(s) to	
	Address of Reporting ROBERT LEWIS			ier Name ai	nd Ticker	or Tra	ding	Issuer	p of Kep	ording Pers	10% Owner Other (specify w) pp Filing(Check	
INTLOR		5	Symbol	ANCORF		VII						
					-	-		(C	Check all	applicable	;)	
(Last)	(First)	(Middle)		of Earliest	Transactio	n				100	-	
1516 SVI	VAN WAY			/Day/Year)				X Director Officer ()	give title			
1310 SIL	VAN WAI		01/26/	2006				below)	•	below)	- (-F)	
	(Street)		4. If An	nendment, I	Date Origi	nal		6. Individual o	or Joint/C	Group Filin	1g(Check	
			Filed(M	lonth/Day/Ye	ar)			Applicable Line	e)			
								_X_Form filed				
LOUISVII	LLE, KY 40205							Person	by More u	nan One Ke	porting	
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivati	ve Sec	urities A	cquired, Dispose	d of, or l	Beneficial	ly Owned	ł
1.Title of	2. Transaction Date	2A. Deeme	d	3.	4. Securi	ties A	cquired	5. Amount of	6.	7. N	ature of	
Security	(Month/Day/Year)	Execution I	Date, if	Transactio	n(A) or D	ispose	d of (D)	Securities	Owners		rect Benef	ficial
(Instr. 3)		any		Code	(Instr. 3,	4 and	5)	Beneficially	Form:		nership	
		(Month/Da	y/Year)	(Instr. 8)				Owned Following	Direct (or Indire		r. 4)	
								Reported	(I)	cet		
						(A) or		Transaction(s)	(Instr. 4)		
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common								2 000	D			
Stock								2,000	D			
										Tru	st-Direc	ctors
Common	01/26/2006			Р	62.33	А	\$	2,248.104	Ι		Ferred Co	
Stock				-	52.00		25.67	_,	-	Pla		P

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.

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and A Underlying S (Instr. 3 and	Securities	8. l De Sec (In
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option (Right to Buy)	\$ 18.95					07/15/2004(1)	07/15/2013	Common Stock	2,000	
Option (Right to Buy)	\$ 21.26					04/21/2005 <u>(2)</u>	04/21/2014	Common Stock	1,000	

Reporting Owners

Reporting Owner Name / Address	3			
	Director	10% Owner	Officer	Other
TAYLOR ROBERT LEWIS 1516 SYLVAN WAY LOUISVILLE, KY 40205	Х			
Signatures				
/s //Robert Lewis Taylor	01/26/2006	6		

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** 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 options vest 20% per year beginning 7/15/2004
- (2) These options vest 20% per year beginning 4/21/2005

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.

**Signature of Reporting

Person