SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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OMB Number:

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person [*] Dawson Leah K.	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 10/06/2020					
(Last) (First) (Middle) 10990 ROE AVENUE			4. Relationship of Reporting Issuer (Check all applicable) Director	Person(s	Í l	5. If Amendment, Date of Original Filed (Month/Day/Year)	
(Street) OVERLAND PARK KS 66211			X Officer (give title below) Executive VP, GC a	Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City) (State) (Zip)							
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. I)			Nature of Indirect Beneficial wnership (Instr. 5)	
Common Stock			2,163	D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4) Expi (Mor			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversi or Exerci Price of		6. Nature of Indirect Beneficial Ownership (Instr.
Explanation of Responses:	Date Exercisable	Expiration Date		Amount or Number of Shares	Derivative Security		5)

xplanation of Responses:

/s/Leah K. Dawson

10/08/2020 Date

** Signature of Reporting Person

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.