Edgar Filing: Immanivong Uno - Form 4

Immanivong Form 4	Uno										
June 19, 2018	3										
										PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 chligations				GES IN BENEFICIAL OWNERSHIP O SECURITIES 6(a) of the Securities Exchange Act of 1934 ility Holding Company Act of 1935 or Sect				ge Act of 1934,	January 3 Expires: 200 Estimated average burden hours per response 0		
may conti <i>See</i> Instru 1(b).	nue.			vestment (•	• •			,11		
(Print or Type R	esponses)										
1. Name and Address of Reporting Person *2. IssuerImmanivong UnoSymbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			Ashford	rd Inc. [AINC]				(Check all applicable)			
(Last) (First) (Middle) 3. Date of I (Month/Da			Earliest Transaction				X Director 10% Owner				
14185 DALLAS 06/15/2 PARKWAY, SUITE 1100			06/15/20	018 <u>—</u> Officer (giv below)				e title Other (specify below)			
			ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
DALLAS, T	X 75254							Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, any (Month/Day/Year)		on Date, if				SecuritiesHBeneficially(OwnedH	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	06/15/2018			A <u>(1)</u>	1,040 (2)	A	\$ 0 (1)	1,986	D		

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)

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

Reporting Owners

Reporting Owner Name / Address	5	Relationships							
1 0	Director	10% Owner	Officer	Other					
Immanivong Uno 14185 DALLAS PARKWAY SUITE 1100 DALLAS, TX 75254	X								
Signatures									
/s/ UNO IMMANIVONG	06/19/201	8							
<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) The shares were issued to the Reporting Person as an annual stock grant from the Issuer under the Issuer's 2014 Incentive Plan upon the Reporting Person's re-election to the Issuer's Board of Directors.

The annual stock grant was made to the Reporting Person as part of the non-employee director annual base retainer of \$150,000, which is
 (2) payable 50% in cash and 50% in common stock of the Issuer. The common stock acquired by the Reporting Person and reported on this Form 4 reflects the common stock portion of such annual base retainer.

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.