

## **BOSTON OMAHA CORP**

# Reported by SCHOLL MICHAEL JEFFREY

### FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 11/19/18 for the Period Ending 11/19/18

Address 1411 HARNEY ST.

SUITE 200

OMAHA, NE, 68102

Telephone 857-256-0079

CIK 0001494582

Symbol BOMN

SIC Code 6510 - Real Estate Operators (No Developers) and Lessors

Industry Advertising & Marketing

Sector Consumer Cyclicals

Fiscal Year 12/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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

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

Name and Address of Reporting Person *					2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Scholl Michae	el Jeffre	y		В	OST	TON (	)MAHA	C	orp [	BOMN	<b>1</b> ]						
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Director					
												XOfficer (g Subsidiary P		ow)	Other (speci	ity below)	
C/O BOSTON							11/1	19/2	2018			Subsidiary	esiuciii				
CORPORAT			RNEY														
STREET, SU																	
	(Stre	et)		4.	4. If Amendment, Date Original Filed (MM/DD/YYYY)							YY) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
OMAHA, NE 68102													_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City	y) (Sta	te) (Z	ip)									1 01111 11104 0)	THOIC MAIN	one reporting i	0.501.		
			Table 1	I - Non-De	rivat	ive Sec	urities Ac	quii	red, Dis	sposed o	f, or	Beneficially Own	ed				
1. Title of Security (Instr. 3)			2. Trans. Date	Exec	Deemed ution if any	3. Trans. Code (Instr. 8) 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				ired (A		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership Form: Beneficial		
						Code	v	Amoun	(A) or (D)	Price	e				Ownership (Instr. 4)		
Class A common stock, par value \$0.001 per share 11/19/201				11/19/2018			P		350	A	\$24.2	5	2100		I (1)	See footnote	
Class A common stock, par value \$0.001 per share													1100		D		
	Tab	le II - Der	ivative	Securities	Bene	eficially	Owned (	e.g.	, puts,	calls, w	arrar	nts, options, conve	ertible sec	curities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deer Executio Date, if a	n (Instr. 8	tr. 8) De Ac Dis		Number of erivative Securities equired (A) or isposed of (D) nstr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned	Security:	Beneficial	
				Code	v	(A)	(D)	Dat Exe	e ercisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)		

herein.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Scholl Michael Jeffrey								
C/O BOSTON OMAHA CORPORATION			Subsidiary President					
1411 HARNEY STREET, SUITE 200		Subsidiary Presi						
OMAHA, NE 68102								

#### **Signatures**

/s/ Michael J. Scholl 11/19/2018 \*\* 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 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).

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

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

