Edgar Filing: OShaughnessy Robert - Form 4

| OShaughne Form 4 | | | | | | | | | | |
|---|---|--|--|-----------------------|-----|--------------------|--|---|--------------------------|--|
| February 08, 2019 OMB APPROVAL | | | | | | | | | | |
| | FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 January 31, | |
| Check th if no lor subject to Section Form 4 Form 5 obligation may cor <i>See</i> Inst 1(b). | nger to 16. or Filed pur Ons stinue. | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 a 20(b) of the Investment Company Act of 1940 | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | |
| OShaughnessy Robert Symbol | | | 2. Issuer Name a ymbol PULTEGROU | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (N | | 3. Date of Earliest Transaction | | | | (Check all applicable) | | | |
| | | | Month/Day/Year) 2/06/2019 | | | | Director10% Owner XOfficer (give titleOther (specify below) below) Exec. VP & CFO | | | |
| (Street) 4. If Amo Filed(Mo | | | | Date Origina Tear) | al | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| (City) | (State) | (Zip) | | D • 4 | G | | Person | D (* • 1 | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution D any | 1 | | | equired (A) (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. 7. Nature o Ownership Indirect Form: Beneficial Direct (D) Ownership or Indirect (Instr. 4) (I) (Instr. 4) | | |
| Common | | | Code | V Amount 31,067 | (D) | Price | (Instr. 3 and 4) | | | |
| Stock | 02/06/2019 | | А | (1) (2) | А | \$0 | 378,030 | D | | |
| Common Stock | 02/06/2019 | | F | 9,397 (3) | D | \$ 26.855 | 368,633 | D | | |
| Common Stock | 02/06/2019 | | А | 30,721 | А | \$0 | 399,354 | D | | |

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

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number.

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) | 4. Transactic Code (Instr. 8) | | | | 7. Titl Amou Under Secur (Instr. | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---------|---------------------|--------------------|--|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|----------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| OShaughnessy Robert 3350 PEACHTREE ROAD NORTHEAST SUITE 150 ATLANTA, GA 30326 | | | Exec. VP & CFO | | | | |
| Signatures | | | | | | | |
| /s/ Todd N. Sheldon, Attorney-in-Fact | 02/08/201 | 9 | | | | | |
| **Signature of Reporting Person | Date | | | | | | |
| Explanation of Respons | es: | | | | | | |

* 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) These shares were granted to settle a stock-settled performance award under the PulteGroup, Inc. 2013 Senior Management Incentive Plan.
- (2) These shares are fully vested and exercisable.
- (3) These shares were surrendered to issuer to cover tax obligations on common shares granted to settle a stock-settled performance award.

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.