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MID AMERICA APARTMENT COMMUNITIES INC

Form 4

January 12, 2017

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.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

OMB APPROVAL

Form 4 or Form 5 obligations may continue. See Instruction

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 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Symbol

response... 0.5

burden hours per

5. Relationship of Reporting Person(s) to

Issuer

100

1,000

I

I

Ira

Joint

Tenancy

1(b).

Common

Common

Stock

Stock

(Print or Type Responses)

Campbell Albert M III

1. Name and Address of Reporting Person *

			MID AMERICA APARTMENT COMMUNITIES INC [MAA]						(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	3. Date of Earliest Transaction					Director 10% Owner				
			*	(Month/Day/Year)						X Officer (give title Other (specify below)			
6584 POPLAR AVENUE, SUITE 300			01/10/20	01/10/2017						EVP, Chief Financial Officer			
	(Street)	4. If Ame	4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check				
MEMPHIS.	Filed(Mor	Filed(Month/Day/Year)						Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
WILMIFTIIS,							Person						
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of	2. Transaction			3.		4. Securi			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Y	onth/Day/Year) Execution Date, if any			ct101	n(A) or Di (D)	spose	d of	Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(msu. 3)		•	h/Day/Year)	· · · · · · · · · · · · · · · · · · ·			Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)				
							(A) or		Reported Transaction(s)	· · ·	, ,		
C				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	01/10/2017			F(1)		218	D	\$ 97.5	43,804	D			
Common Stock									2,736.0019	I	Allocated Shares In Esop		

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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.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	tionNumber	Expiration Da	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)) Derivative	e		Securi	ties	(Instr. 5)
	Derivative				Securities	3		(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									A	
									Amount	
						Date Exercisable	Expiration Date	Title	or	
									Number	
				G 1 1	7 (4) (5)				of	
				Code V	V (A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Campbell Albert M III 6584 POPLAR AVENUE SUITE 300 MEMPHIS, TN 38138-

EVP, Chief Financial Officer

Signatures

/s/ Leslie 01/12/2017 Wolfgang

**Signature of Date
Reporting Person

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) Disposals are being withheld to cover taxes related to vesting pursuant to shares earned and issued under a prior year restricted stock plan. 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.

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