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COBB SUE Form 4 February 02 FORM Check th if no lon subject to Section 3 Form 4 c Form 5 obligation may con <i>See</i> Instr 1(b).	, 2011 A 4 UNITED S his box ger o STATEM 16. or Filed pure Section 17(a)	IENT OI suant to S a) of the l	Wa F CHAN Section 1 Public U	shington, NGES IN SECUR 6(a) of th	, D.C. 20 BENEFI RITIES e Securit ding Con	549 ICIA ies E ipany	L OW	COMMISSIO /NERSHIP OF ge Act of 1934, of 1935 or Secti 40	N OMB Number: Expires: Estimated burden h response	•		
(Finit of Type	Kesponses)											
COBB SUE M Symbol			er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
				e of Earliest Transaction				(Check all applicable)				
C/O BANKUNITED, INC., 14817 (Month/D OAK LANE				/Day/Year) /2011								
				endment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
MIAMI LA	KES, FL 33016							Person	More than One	Reporting		
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Ac	quired, Disposed	of, or Benefic	ially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any			3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or				6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock, par value \$0.01 per share	02/02/2011			S	27,842	D	\$ 27	56,780	D			
Common Stock, par value \$0.01 per share	02/02/2011			S	19,490	D	\$ 27	39,745	I	As Trustee (1)		
Common Stock, par	02/02/2011			S	8,353	D	\$ 27	17,034	I	By Foundation		

value \$0.01 per share

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.

(2)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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						
1	Director	10% Owner	Officer	Other			
COBB SUE M C/O BANKUNITED, INC. 14817 OAK LANE MIAMI LAKES, FL 33016	X						
Signatures							
/s/ Douglas J. Pauls, as Attorne in Fact	y 02/02/2011						
**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).

Held by the Cobb Family Twenty-Second Century Fund I, over which the reporting person is the trustee. The reporting person disclaims
(1) beneficial ownership of these securities except to the extent of her pecuniary interest therein and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of these shares for Section 16 or for any other purpose.

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Held by the Cobb Family Foundation, of which the reporting person is a director. The reporting person disclaims beneficial ownership of (2) these securities except to the extent of her pecuniary interest therein and the inclusion of these shares in this report shall not be deemed an

admission of beneficial ownership of these shares for Section 16 or for any other purpose.

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.