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Schaffner Jerry Form 4 February 26, 2019 FORM 4 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations Nay continue. See Instruction 1(b).								•			
(Print or Type	Responses)										
Schaffner Jerry S			2. Issuer Name and Ticker or Trading Symbol Hilltop Holdings Inc. [HTH]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Middle)	•	f Earliest Tr	_	-		(Chec	k all applicable	:)	
			(Month/Day/Year) 02/23/2019					Director 10% Owner Officer (give title Other (specify below) below) Delow) PlainsCapital Bank Pres & CEO			
				mendment, Date Original Month/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 Person 			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		on Date 2A. Deemed /Year) Execution Date, if any (Month/Day/Year)			4. Securi on(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
a				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	02/23/2019			А	9,518 (1)	А	\$0	136,931 <u>(2)</u>	D		
Common Stock	02/23/2019			F	2,398 (3)	D	\$ 19.93	134,533 <u>(2)</u>	D		
Common Stock	02/23/2019			F	2,141 (4)	D	\$ 19.93	132,392 <u>(2)</u>	D		
Common Stock								1,459 <u>(5)</u>	Ι	By Wife	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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	Relationships						
	Director	10% Owner	Officer	Other			
Schaffner Jerry 2323 VICTORY AVENUE, SUITE 1400 DALLAS, TX 75219			PlainsCapital Bank Pres & CEO				
Signatures							

/s/ JERRY **SCHAFFNER**

**Signature of Reporting

Person

> 02/26/2019 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).
- Represents shares of common stock delivered upon the vesting of performance-based restricted stock units awarded on February 23, 2016 (1)in connection with the achievement of certain performance criteria.
- (2) Includes 11,970 shares of common stock held in an individual retirement account for the benefit of the reporting person.
- Represents shares of common stock withheld by the issuer to satisfy tax withholding obligations in connection with the vesting of (3)performance-based restricted stock units awarded on February 23, 2016.
- Represents shares of common stock withheld by the issuer to satisfy tax withholding obligations in connection with the vesting of (4) time-based restricted stock units awarded on February 23, 2016.

(5)

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The reporting person disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest therein. The reporting person states that neither the filing of this statement nor anything herein shall be deemed an admission that the reporting person is, for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or otherwise, the beneficial owner of these shares.

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.