Edgar Filing: M I HOMES INC - Form 4

M I HOMES INC Form 4 May 08, 2014	2											
FORM 4										OMB A	PPROVA	۱L
	UNITED	STATES					GE C	OMMISSIO	DN	OMB Number:	3235-	0287
8 9 9								average Irs per	ry 31, 2005 0.5			
(Print or Type Respo	nses)											
1. Name and Addres Carter William H	2. Issuer Name and Ticker or Trading Symbol M I HOMES INC [MHO]					5. Relationship of Reporting Person(s) to Issuer						
(Last)	(First) (1	(Middle) 3. Date of Earliest Transaction					(Ch	heck all applicable)				
180 EAST BROAD STREET			(Month/Day/Year) 05/06/2014					X_ Director 10% Owner Officer (give title Other (specify below) below)				
COLUMBUS, O	4. If Amendment, Date Original Filed(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)	Tab	le I - Non-l	Deriva	tive Securitie	es Aca	uired, Disposed	l of.	or Beneficia	llv Owne	d
	ansaction Date ath/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Sec nAcqui Dispc (Instr.	(A) or (A) or (D) (A) (A) (A) (A) or	5. Se B O Fe R	Amount of ecurities eneficially wned bllowing eported ransaction(s) nstr. 3 and 4)	6. Fo (D (I)	Ownership rm: Direct) or Indirect	7. Nature Indirect	e of al ip
Reminder: Report on	n a separate line	for each cl	ass of sect	urities bene:	Pe inf red dis	rsons who ormation c quired to re	respo contair espono	ndirectly. and to the coll ned in this for d unless the fo y valid OMB co	m a orm	re not	SEC 1474 (9-02)	

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. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Securi
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired			(Instr.

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	Derivative Security				(A) or Dispose (D) (Instr. 3 and 5)						
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock (1)	<u>(2)</u>	05/06/2014	А		1,114		(3)	(3)	Common Shares	1,114	\$ 21
Stock Unit (4)	<u>(2)</u>	05/06/2014	А		2,500 (5)		(4)	(4)	Common Shares	2,500	\$

Reporting Owners

Reporting Owner Name / Address		Relationsh		
	Director	10% Owner	Officer	Other
Carter William H 180 EAST BROAD STREET COLUMBUS, OH 43215	Х			
Signatures				
/s/Phillip G. Creek, Attorney-in	n-Fact for	William H.		05/08/2014

Carter

**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).
- (1) The Phantom Stock units were granted as payment for serving as a member of the Board of Directros pursuant to the M/I Homes, Inc. Director Deferred Compensation Plan (the "Plan").
- (2) 1-for-1
- (3) The Phantom Stock units accrue under the Plan and are to be settled in Common Shares upon the earlier of (i) the date speciated by the reporting person in his deferral notice, or (ii) the date of the reporting person's termination of service as a director.
- (4) The Stock Units accrue under the M/I Homes, Inc. 2009 Long-Term Incentive Plan, as amended (the "2009 LTIP") and will be settled in Common Shares as of the date of the Director's separation from service from the Company.
- (5) Represents Stock Units credited to the reporting person under the 2009 LTIP for dividends accrued on Common Shares underlying Stock Units held by the reporting person under the 2009 LTIP.

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.