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UNIVERSAL	CORP /VA/											
Form 4												
June 08, 2016	5											
FORM	Δ										PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box				0						Expires:	January 31,	
if no longe subject to	er STATE	MENT O	F CHAN	GES IN	ES IN BENEFICIAL OWNERSHI					Estimated a	2005	
Section 16	CE OLIDITEIO								irs per			
Form 4 or									response 0.5			
Form 5	~ ^							-	ge Act of 1934,			
obligation may contin				•	•		• •		f 1935 or Sectio	n		
See Instrue 1(b).		30(h)	of the Inv	vestmen	t Con	npany	/ Act	of 194	40			
(Print or Type R	esponses)											
		_ *										
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading					g	5. Relationship of Reporting Person(s) to Issuer						
Wigner Preston Douglas Symbol								~ ~ ~	155001			
UNIVEF				RSAL CORP /VA/ [UVV]				٧J	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction									
				/Day/Year)					Director 10% Owner			
9201 FOREST HILL AVENUE 06/06/2			06/06/20	6/2016					_X_ Officer (give title Other (specify below) below) VP, General Counsel & Secy			
	(Street)		4 If Amer	ndment D)ate Or	riginal					-	
				nendment, Date Original Ionth/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
									X Form filed by			
RICHMONE	D, VA 23235								Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-	Deriva	ative S	ecuri	ties Aco	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction D							5. Amount of	6. Ownership			
Security	(Month/Day/Yea	on Date, if		quired				Form: Direct				
(Instr. 3)		any (Month	/Day/Year)	Code Disposed of (D) (Instr 8) (Instr 3 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
(WORD)			Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Following	(Instr. 4)			
							(A)		Reported			
							or		Transaction(s)			
				Code	V An	nount	(D)	Price	(Instr. 3 and 4)			
Common Stock	06/06/2016			F	1, <u>(</u> 1)	592	D	\$ 56	42,170 <u>(2)</u>	D		

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.

 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 unt of rlying rities . 3 and 4)	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		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Wigner Preston Douglas 9201 FOREST HILL AVENUE RICHMOND, VA 23235			VP, General Counsel & Secy					

Signatures

Preston D. 06/08/2016 Wigner

**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).
- Disposition of common stock to satisfy the tax withholding obligation upon vesting of restricted stock units and dividend units on the (1) restricted stock units.

Includes 20,400 restricted stock units and 1,685 dividend units on the restricted stock units. The restricted stock units and the dividend (2) units vest on the fifth anniversary of the award date, however, payment will be delayed until termination of service if the individual is a covered employee under Code Section 162(m) on the date of vesting.

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.