UNIVERSAL CORP /VA/

Form 4 July 15, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or

Section 16.

Form 4 or

Form 5

obligations

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 17(b) of the Public Utility Holding Company Act of 1935 or Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 17(b) of the Public Utility Holding Company Act of 1935 or Section 17(c) of the Public Utility Holding Company Act of 1935 or Section 17(c) of the Public Utility Holding Company Act of 1935 or Section 17(c) of the Public Utility Holding Company Act of 1935 or Section 18(c) of the Securities Exchange Act of 1935 or Section 18(c) of the

Form 5 obligations may continue. See Instruction 1(b).

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

(Print or Type Responses)

1. Name and Address of Reporting Person * HUFFMAN JAMES A			2. Issuer Name and Ticker or Trading Symbol UNIVERSAL CORP /VA/ [UVV]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check an application)			
9201 FOREST HILL AVENUE		NUE	(Month/Day/Year) 07/13/2016	Director 10% Owner Officer (give titleX Other (specify below) Subsidiary Officer			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
(Street) RICHMOND, VA 23235			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			

(City)	(State) (Zip) Table	e I - Non-D	erivative	Secur	rities Acq	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Date, if Transaction(A) or Disposed of (D Code (Instr. 3, 4 and 5)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	07/13/2016		Code V	Amount 5,200	(A) or (D)	Price \$ 51.32	Transaction(s) (Instr. 3 and 4) 36,394 (1)	D	
Common Stock	07/13/2016		D	4,442	D	\$ 60.08	31,952 (1)	D	
Common Stock	07/13/2016		F	339	D	\$ 60.08	31,613 (1)	D	

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

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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)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	and 5)	Date Exercisable	Expiration Date	Title	Amour or Number of Shares
Stock Appreciation Rights	\$ 51.32	07/13/2016		M	5,200	05/28/2011	05/28/2018	Common Stock	5,20

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HUFFMAN JAMES A 9201 FOREST HILL AVENUE RICHMOND, VA 23235

Subsidiary Officer

Signatures

James A. Huffman, by Preston D. Wigner, Power of Attorney

07/15/2016

**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).

Includes 13,650 restricted stock units and 1,025 dividend units on the restricted stock units. The restricted stock units and the dividend (1) 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.

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