## Edgar Filing: PULTEGROUP INC/MI/ - Form 4

PULTEGRC	OUP INC/MI/											
Form 4												
June 10, 201	4											
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287			
Check th		U	·				Expires:	January 31,				
if no long subject to		MENT O	F CHANGES IN BENEFICIAL OWNERSHIP						Estimated average			
Section 1		SECUI	RITIES				burden hours per					
Form 4 o	or								response (			
Form 5	Filed pu	ursuant to S	Section 1	6(a) of the	ne Securit	ies E	xchange	e Act of 1934,				
obligation may cont		(a) of the	Public U	tility Hol	ding Con	npany	Act of	1935 or Section	1			
See Instru		30(h)	of the In	vestment	t Compan	y Act	t of 194	0				
1(b).												
(Print or Type I	Responses)											
1 Name and A	Address of Reportin	a Damon *	<b>.</b> .		1			5 Deletionship of	Poporting Dars	on(a) to		
MARSHAL	•			r Name <b>an</b>	<b>d</b> Ticker or	Tradin	ıg	5. Relationship of Reporting Person(s) to Issuer				
	Symbol	CROUD			11							
			INC/MI/	[PHI	vij	(Check all applicable)						
(Last)	(First)	(Middle)		f Earliest T	ransaction							
04011 3374 3			(Month/E	•				Director 10% Owner X Officer (give title Other (specify				
24311 WALDEN CTR DR STE 300 06				014				below) below)				
								Executi	ve Vice Preside	ent		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
	Filed(Mor	nth/Day/Yea	ır)			Applicable Line)						
								_X_Form filed by C				
BONITA SI	PRINGS, FL 34	134						Form filed by M Person	lore than One Ke	porting		
(City)	(State)	(Zip)	Tabl	le I - Non-l	Derivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	te 2A. Deer	ned	3.	4. Securit	ies Ac	quired	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year	) Execution	n Date, if	Transaction(A) or Disposed of (D)				Securities	-	Indirect		
(Instr. 3)		any		Code	(Instr. 3, 4	4 and 5	5)	Beneficially				
		(Month/I	Day/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)		
								Reported	(Instr. 4)	(insu: i)		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	06/06/2014			C			\$	70.091	D			
Stock	06/06/2014			S	10,000	D	20.13	79,981	D			
										By 401(k)		
Units								1,079.914	Ι	Plan		
										1 Iuli		

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.

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 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. Transactic 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	
	Director	10% Owner	Officer	Other
MARSHALL RYAN 24311 WALDEN CTR DR STE 300 BONITA SPRINGS, FL 34134			Executive Vice President	
Signatures				
/s/ Steven M. Cook, Attorney-In-Fact	06/1	0/2014		

\*\*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).

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.