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OLD REPUBLIC INTERNATIONAL CORP

Form 5 January 21, 2016 **OMB APPROVAL** FORM 5 OMB UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations **OWNERSHIP OF SECURITIES** response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer MUELLER KARL W Symbol **OLD REPUBLIC** (Check all applicable) **INTERNATIONAL CORP** [ORI] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) Director 10% Owner _X__ Officer (give title _ Other (specify (Month/Day/Year) below) below) 12/31/2015 Sr. VP & CFO 307 NORTH MICHIGAN AVENUE (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) CHICAGO, ILÂ 60601

X Form Filed by One Reporting Person ____ Form Filed by More than One Reporting

Person

(City)	(State)	(Zip) Tab	le I - Non-Dei	rivative Se	curitie	es Acquir	ed, Disposed of,	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned at end of Issuer's	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Amount	(A) or (D)	Price	Fiscal Year (Instr. 3 and 4)	(Instr. 4)	
Common Stock	03/16/2015	Â	J <u>(1)</u>	59.996	А	\$ 14.94	4,904	D	Â
Common Stock	06/15/2015	Â	J <u>(1)</u>	58.582	А	\$ 15.49	4,962	D	Â
Common Stock	09/15/2015	Â	J <u>(1)</u>	58.016	А	\$ 15.82	5,020	D	Â
Common Stock	12/15/2015	Â	J <u>(1)</u>	50.22	А	\$ 18.49	5,070	D	Â

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Common Stock	03/16/2015	Â	J <u>(1)</u>	50.41	Α	\$ 14.94	4,119	Ι	By IRA
Common Stock	06/15/2015	Â	J <u>(1)</u>	49.222	А	\$ 15.48	4,168	Ι	By IRA
Common Stock	09/15/2015	Â	J <u>(1)</u>	48.746	А	\$ 15.82	4,217	Ι	By IRA
Common Stock	12/15/2015	Â	J <u>(1)</u>	42.196	А	\$ 18.49	4,260	Ι	By IRA
Common Stock	12/31/2015	Â	J <u>(2)</u>	0	А	\$ 0	14,576	Ι	By ESSOP

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.

SEC 2270 (9-02)

 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. Transaction Code (Instr. 8)	5. Number 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)	
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships							
FoBo	teportung o wher runne / runness			Officer	Other				
MUELLER KARL W 307 NORTH MICHIGAN CHICAGO, IL 60601	AVENUE	Â	Â	Sr. VP & CFO	Â				
Signatures									
Karl W. Mueller	01/21/2016								
<u>**</u> 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) Dividend reinvestment purchases.
- (2) No transaction to report related to this indirect ownership of 14,576 shares.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.