## Edgar Filing: Forestar Group Inc. - Form 4

Forestar Grou Form 4	p Inc.									
November 20,									PPROVAL	
FORM	<b>4</b> UNITED S	STATES SECURITIES AND EXCHANGE COMMISSION         Washington, D.C. 20549         STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES         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         20(b) of the Investment Company Act of 1040							3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligations	r <b>STATEMI</b>								Expires:January 31 200Estimated average burden hours per response0.	
may contir <i>See</i> Instruc 1(b).	nue. Section 17(a)									
(Print or Type Re	esponses)									
Weinstein David L. Symbo			Issuer Name <b>and</b> Ticker or Trading nbol restar Group Inc. [FOR]				5. Relationship of Reporting Person(s) to Issuer			
(Last) 6300 BEE CA ROAD, BUII 500	Earliest Transaction ay/Year) )15				(Check all applicable) <u>X</u> Director Officer (give title below) <u>Director</u> below) <u>Director</u> <u>below</u> <u>below</u>					
	(Street)	Filed(Month/Day/Year) A					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
AUSTIN, TX	3 78746							More than One Re		
(City)	(State) (Z	Zip) Table	e I - Non-De	erivative S	ecuri	ties Ace	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			SecuritiesIBeneficially(OwnedI	6. Ownership Form: Direct D) or Indirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common			Code V		or (D)	Price	(Instr. 3 and 4)			
Stock	11/19/2015		А	170 <u>(1)</u>	А	\$0	15,027	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)

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	4. 5. Number of		6. Date Exercisable and		7. Title and Amount of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	<b>Fransaction</b> Derivative		Expiration Date		Underlying Securities	
Security	or Exercise		any	Code	Code Securities		(Month/Day/Year)		(Instr. 3 and 4)	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	(Instr. 8) Acquired (A)					
	Derivative				or Disposed of					
	Security			(D)						
					(Instr. 3, 4,					
					and 5)					
										Amount
							Date	Expiration		Amount or
							Exercisable	Date	Title	Number
				Code V	(A) (I	D)	Exercisable	Date		of Shares
				Couc	(A) (L	<i>J</i> ,				01 Shares
Option									0	
(right to	\$ 14.08	02/10/2015		А	20,000		02/10/2016	02/10/2025	Common	20,000
	φ1	02/10/2010		11	20,000		02/10/2010	02/10/2025	Stock	20,000
buy) <u>(2)</u>										

## **Reporting Owners**

Reporting Owner Name / AddressDirector10% OwnerOfficerOtherWeinstein David L.<br/>6300 BEE CAVE ROAD<br/>BUILDING TWO, SUITE 500<br/>AUSTIN, TX 78746XVVVSignatures<br/>David M. Grimm signing on behalf of David L.<br/>WeinsteinI11/20/201511/20/2015\*\*\*Signature of Reporting PersonDateDate

## **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) Restricted stock units accrued under a Company plan to be settled following Reporting Person's retirement.
- (2) Options Vesting Schedule for Options Granted 02/10/2015 Exercise price is \$14.08: Options Exerciserable 02/10/2016 6,500; Options Exerciserable 02/10/2017 6,500; Options Exerciserable 02/10/2018 7,000.

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.