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KEMPER Co	orp											
Form 4	015											
August 04, 2	_											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
Washington, D.C. 20549								OMB Number:	3235-0287			
Check the					210120					January 31,		
if no long subject to		EMENT O	F CHAN	GES IN	BENEF	ICIA	LOW	NERSHIP OF	RSHIP OF			
Subject to Section 1				SECURITIES					Estimated average burden hours per			
Form 4 o	r								response 0.5			
Form 5 obligation							-	e Act of 1934,				
may cont				•	•	· ·	•	1935 or Sectio	n			
See Instru		30(h)	of the In	vestment	Compan	y Ac	t of 194	-0				
1(b).												
(Print or Type F	Responses)											
JI.	I I I I I I I I I I I I I I I I I I I											
1. Name and A	ddress of Reportir	ng Person [*]	2. Issuer	ssuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
King Lisa M	Iarie		Symbol				C	Issuer				
			KEMPE	KEMPER Corp [KMPR]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Chec.				k an applicable)					
			(Month/D	Ionth/Day/Year)				Director 10% Owner				
			07/31/20	015				XOfficer (give titleOther (specify below) below)				
								· · · · · · · · · · · · · · · · · · ·	ice President			
(Street)			4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				th/Day/Year	-			Applicable Line)				
								X Form filed by (
CHICAGO,	IL 60601							Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction D	ate 2A Deer		3.	4. Securi		_	5. Amount of	6. Ownership	-		
Security	(Month/Day/Yea		on Date, if Transaction(A) or Disposed of (D)					Securities	Form: Direct	Indirect		
(Instr. 3)		any		Code (Instr. 3, 4 and 5)			5)	Beneficially		Beneficial		
		(Month/I	Day/Year)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
								Reported	(mout i)	(mout i)		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	07/31/2015			F(1)	116	D	\$	8,117	D			
Stock	0112013				110	D	38.72	5,117	2			
Common								1 001 42	т	by 401(k)		
Stock								1,091.43	Ι	Plan		

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	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							
Reporting O wher Funite / Funitess	Director	10% Owner	Officer	Other					
King Lisa Marie ONE EAST WACKER DRIVE CHICAGO, IL 60601			Vice President						
Signatures									
Lisa M. King 08/	/03/2015								

**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) Withholding of shares to satisfy tax withholding obligation due upon vesting of restricted stock.

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.