Edgar Filing: Norwood Philip W - Form 4

Norwood Phi	lip W										
Form 4											
December 05	, 2012										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this				0 /				Expires:	January 31,		
if no longe subject to	er STATEN	IENT O	F CHAN	GES IN F	BENEFI	CIAL O	WNERSHIP OF		2005 2005		
Section 16.				SECURITIES					Estimated average burden hours per		
Form 4 or Form 5		ouent to	Saction 14	on 16(a) of the Securities Exchange Act of 1934,					response 0.		
obligation	^s Section 17(of 1935 or Section	n			
may contin	nue.		of the Inv	•	.	• •		/11			
See Instruction 1(b).	cuon		01 010 111		company	1100 01 1					
(Print or Type R	esponses)										
1. Name and Address of Reporting Person _ 2. Issuer Name and Ticker or Trading 5. Relationship of						Reporting Person(s) to					
Norwood Philip W			Symbol				Issuer	Issuer			
MID AMERICA APARTMENT					(Che	heck all applicable)					
	COMMUNITIES INC [MAA]				(Che	(check an appreadic)					
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)				XDirector				
							below)	Officer (give titleOther (specifybelow)below)			
6584 POPLA 300	AR AVENUE, S	UIIE	12/04/20)12							
500	(Street)		4 If A	darant Dat	- Oni - in - 1			- ind/Carrow Eili			
	4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)						
					X Form filed by One Reporting Person						
MEMPHIS,	TN 38138-						Form filed by I Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurities A	Acquired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Dat	e 2A. Dee	emed	3.	4. Securit	ies	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Executi	on Date, if	TransactionAcquired (A) or		Securities	Form: Direct	Indirect			
(Instr. 3)		any (Month)	/Day/Year)	Code (Instr. 8)	Disposed (Instr. 3, 4	. ,	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(Wond)	(Day) I cal)	(11301.0)	(1130. 5,	+ and 5)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
Comment				Code V	Amount	(D) Pric	e (insur 5 und 1)				
Common Stock							1,890	D			
SIUCK											

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 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. Numbo onof Derivativ Securitie: Acquired (A) or Disposed of (D) (Instr. 3, and 5)	Expiration l e (Month/Day s	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (I	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	\$ 0	12/04/2012		А	213	(1)	<u>(1)</u>	Common Stock	213	\$ 62.8

Reporting Owners

Reporting Owner Name / Addre	Relationships						
	Director	10% Owner	Officer	Other			
Norwood Philip W 6584 POPLAR AVENUE SUITE 300 MEMPHIS, TN 38138-	Х						
Signatures							
/s/ Jennifer Patrick	12/05/2012						

**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) The units are to be settled in MAA common stock in 2 equal annual installments beginning within 90 days following the end of the calendar year in which the reporting person ceases to be a director.

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.