FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | DVAL | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | | | |
| l | Estimated average burden | | | | | | | |
| l | hours per response: | 0.5 | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* DeMark Eugene F | | | | | | 2. Issuer Name and Ticker or Trading Symbol BankUnited, Inc. [BKU] | | | | | | | | | | | plicable) ctor | | Person(s) to Issuer | | |
|---|--|--------|-------------------|-----------------------------------|-------|---|--|-------|---|-----|--|--|-------------|---|---|---|------------------------------|---|--|---|--|
| (Last) (First) (Middle) C/O BANKUNITED, INC. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/18/2016 | | | | | | | | | | Officer (give title below) | | | Other (specify below) | | |
| 14817 OAK LANE | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) MIAMI LAKES FL 33016 | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curitie | s Acc | quired, | Dis | posed o | f, or | Ben | efici | ally | Owne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | ar) I | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispose Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Sec Ber Ow | | curities I neficially | | nership Direct Indirect tr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (| A) or D) | or Price | | Transaction(s) (Instr. 3 and 4) | | | | (| |
| Common Stock, par value \$0.01 per share 05/18/2 | | | | | | | | | | | 3,000 | (1) A \$ | | \$0. | 0.00 1 | | 7,682 | | D | | |
| | 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) | ive Conversion Date Execution y or Exercise (Month/Day/Year) if any | | Date, ny/Year) | Date, Transaction Code (Instr. | | of Derive Secue Acque (A) or Disposof (D) (Instr | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Shares | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ov Fo Dii or (I) | vnership rm: rect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. Reflects 3,000 restricted shares issued pursuant to the terms of the BankUnited, Inc. 2014 Omnibus Equity Incentive Plan. The restricted shares have a grant date of May 18, 2016, and will vest in substantially equal installments on each of the first three anniversaries of the grant date.

Remarks:

/s/ Susan Greenfield, as Attorney-in-Fact 05/20/2016

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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 Number.