## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL OMB Number:

Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person*  COBB SUE M						2. Issuer Name and Ticker or Trading Symbol BankUnited, Inc. [ BKU ]								5. Relationsh (Check all ap X Dire	plicable)	eporting Person(s) to Issi e) 10% Ow			
	(Fi NKUNITEI AK LANE	rst) O, INC.	(Middle	)	02/	15/20	12				h/Day/Year)			Offic belo			elow)	specify	
(Street) MIAMI I	LAKES FI		33016 (Zip)		_   4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tak	le I - I	Non-Deriv	<i>r</i> ative	Sec	uritie	s Ac	quire	ed, Di	isposed o	f, or E	Benefic	ially Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y				Execution Date,		·	Transaction Disposed Of (D Code (Instr. 5)		Acquired (A) or (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 ar				(iiisii	1. 4)
Common Stock, par value \$0.01 per share 02/15/201				012	12			A		1,000(1)	A	\$0.00	57,7	80	D				
Common	Common Stock, par value \$0.01 per share													39,7	39,745		I As		Trustee <sup>(2)</sup>
Common	Stock, par	value \$0.01 per	share											17,034 I B					ndation <sup>(3)</sup>
	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)	erivative curity or Exercise (Month/Day/Year)  Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)				Expir (Mon	ration D		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of		8. Price of Derivative Security (Instr. 5) Benefic Owned Following Report Transa (Instr. 4)		ive Owners ties Form: cially Direct (		D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

- 1. Issued pursuant to the terms of the BankUnited, Inc. 2010 Omnibus Equity Incentive Plan. One-third of the 1,000 shares reported in this Form 4 will vest on each of the first, second and third anniversaries of
- 2. Held by the Cobb Family Twenty-Second Century Fund I, over which the reporting person is the trustee. The reporting person disclaims beneficial ownership of these securities except to the extent of her pecuniary interest therein and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of these shares for Section 16 or for any other purpose.
- 3. Held by the Cobb Family Foundation, of which the reporting person is a director. The reporting person disclaims beneficial ownership of these securities except to the extent of her pecuniary interest therein and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of these shares for Section 16 or for any other purpose

## Remarks:

/s/ Douglas J. Pauls, as 02/16/2012 **Attorney in Fact** 

\*\* 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.