FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	3.			
CTATEMENT	OF CHANCE	INI DENIEEIOI	AL OVANIEDO	
STATEMENT	OF CHANGES	IN BENEFICI	AL OWNERS	HIP

	OMB APPRO	JVAL					
	OMB Number:	3235-0287					
Estimated average burden	len						
	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

								,			1 ,								
1. Name and Address of Reporting Person* <u>LUNAK LESLIE</u>						2. Issuer Name and Ticker or Trading Symbol BankUnited, Inc. [BKU]									all applic Directo	all applicable) Director		g Person(s) to Issuer 10% Owne	
	(First) (Middle) BANKUNITED, INC. 7 OAK LANE					3. Date of Earliest Transaction (Month/Day/Year) 03/15/2021									X Officer (give title Other (spe below) Chief Financial Officer				
(Street) MIAMI LAKES FL 33016				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	Zip)																
		Tabl	e I - No	n-Deriv	ative	Sec	curiti	es Ac	_	, Dis	posed o			ally (Owned				
Date			2. Transa Date (Month/E		Execution Date,		Trans Code	Transaction Dispo Code (Instr.		securities Acquired (A) o posed Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F Reported	s illy ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount (A) or (D)		Price	Turingan		ion(s)			(111311. 4)
Common Stock, par value \$0.01 per share 03/15/					/2021	2021		М	Т	16,016	16,016 A \$4		.92	92,859			D		
Common Stock, par value \$0.01 per share 03/1				03/15	2021		D		16,016	16,016 D \$4		.92	2 76,843			D			
		Ta	able II -								osed of, convertil				wned				
Security or Exercise (Month/Day/Year) if an				ned on Date, Day/Year)	4. Transaction Code (Instr. 8)		n of l		Expirati	6. Date Exercis Expiration Dat (Month/Day/Ye		7. Title an Amount o Securities Underlyin Derivative (Instr. 3 au	f s g Securit	De Se (Ir	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						v	(A)	(A) (D) E			Expiration Date	Title	Amour or Number of Shares	er					
Restricted Stock Unit	(1)	03/15/2021			M		8,324		(2)	(2)		Common Stock, par value \$0.01 per share	8,324	4	\$0.00 14,5		14,938 D		
Performance Share Unit	(1)	03/15/2021			M			7,692	(3)		(3)	Common Stock, par value \$0.01 per share	7,692	2	\$0.00	0		D	

Explanation of Responses:

- 1. Each restricted stock unit and performance share unit represents the right to receive, at settlement, one share of common stock or cash in an amount equal to the fair market value of one share of common
- 2. Issued pursuant to the terms of the BankUnited, Inc. 2014 Omnibus Equity Incentive Plan. 8,324 units vested on December 31, 2020, 5,759 units will vest on December 31, 2021, 5,760 units will vest on December 31, 2022, and 3,419 units will vest on December 31, 2023.
- 3.7,692 performance share units vested on December 31,2020 and are fully vested.

Remarks:

/s/ Susan Greenfield, Attorneyin-Fact

03/16/2021

** Signature of Reporting Person

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.