Edgar Filing: ZUCARO ALDO C - Form 4

ZUCARO A	LDO C											
Form 4												
November 0'												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									r	APPROVAL		
	UNITED	SIAIL		shington,			NGE C	201411411551014	OMB Number:	3235-0287		
Check the				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	D.C. 200					January 31,		
if no long		IENT O	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF	Expires:	2005		
subject to Section 16. SECURITIES								Estimated average burden hours per				
Form 4 o	r								response	•		
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, ^{obligations} Section 17(c) of the Public Utility Holding Company Act of 1025 or Section												
may cont				•	•	· ·		f 1935 or Sectio	n			
See Instru	uction	30(h)	of the In	vestment	Company	y Act	of 194	10				
1(b).												
(Print or Type F	Responses)											
	•											
1. Name and Address of Reporting Person 2. Issuer				Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
ZUCARO A	LDO C		Symbol					Issuer				
				REPUBLIC				(Check all applicable)				
			INTERNATIONAL CORP [ORI]									
(Last)	(First) (M	/liddle)		Earliest Tra	ansaction			X Director		Owner		
				Day/Year)				_X_Officer (give titleOther (specify below) below)				
307 N MICHIGAN AVE, STE 2300 11/04/2				011				Chairman and CEO				
(Street) 4. If				If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mc				onth/Day/Year)				Applicable Line)				
CHICAGO, IL 60601							_X_ Form filed by One Reporting Person Form filed by More than One Reporting					
CHICAGO,	IL 00001							Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed o	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	A. Dee	med	3.	4. Securit	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)		ion Date, if Transaction(A) or Disposed of (D)					Securities	Form: Direct			
(Instr. 3)		any (Month/	Day/Year)	Code (Instr. 8)	(Instr. 3, 4	4 and 3	5)	Beneficially Owned	(_) = = = = = = = = = = = = = = = = = = =	Beneficial Ownership		
		(Ivionuli)	Day/Tear)	(111501.0)				Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	(insu: 5 and 1)				
Common Stool	11/04/2011			Р	10,000	А	\$ 8.45	1,120,080	D			
Stock							0.43					
Common	11/04/2011			J (1)	0	А	\$0	439,071	Ι	By ESSOP		
Stock										<i>,</i>		

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt 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							
	Director	10% Owner	Officer	Other				
ZUCARO ALDO C 307 N MICHIGAN AVE STE 2300 CHICAGO, IL 60601	Х		Chairman and CEO					
Signatures								
William J. Dasso, Power of Att Zucaro	11/07/2011							
<u>**Signature of Reporting</u>		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) No transactions to report related to this indirect ownership of 439,071 shares.

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.