Unum Group Form 4 May 05, 2014

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or shington, D.C. 20549 Number:

Expires: January 31, 2005

Section 16.

Form 4 or
Form 5

Filed pursuant to Section 16(a) of the Secur

Estimated average burden hours per response... 0.5

Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Add McGarry John	•	ing Person *	Issuer Name and Ticker or Trading Symbol Unum Group [UNM]	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check all applicable)			
			(Month/Day/Year)	Director 10% Owner			
1 FOUNTAIN SQUARE			05/01/2014	X Officer (give title Other (specify below) below) EVP, Pres&CEO, Closed Blk Ops			
				EVI, Hesæceo, Closed Bik Ops			
(Street)			4. If Amendment, Date Original 6. Individual or Joint/Group Fi				
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person			
CHATTANOOGA, TN 37402				Form filed by More than One Reporting Person			

(City)	(State) (2	Table Table	I - Non-Do	erivative Secu	rities Acq	quired, Disposed o	of, or Beneficial	ly Owned	
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securities A		5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect	
(Instr. 3)		any (Month/Day/Year)	Code (Instr. 8)	(D) (Instr. 3, 4 and (A) or	ŕ	Beneficially Owned Following Reported Transaction(s)	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
Common Stock	05/01/2014		Code V S(1)	Amount (D) 2,000 D	Price \$ 33.2	(Instr. 3 and 4) 58,582 (2)	D		
Common Stock						764.57	I	By N-Q 401(k) Plan	
Common Stock						3,599.184	I	By 401(k) Plan	

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

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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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	m: 1	or		
						Exercisable	Date	Title	Number		
				C 1 W	(A) (D)				of		
				Code V	(A) (D)				Shares		

Relationshins

Reporting Owners

Reporting Owner Name / Address		ite in the interest of the int			
	Director	10% Owner	Officer	Other	
IcGarry John F			EVP,		
FOUNTAIN SOLIARE			Pres&CEO		

McGarry John F EVP, 1 FOUNTAIN SQUARE Pres&CEO, CHATTANOOGA, TN 37402 Closed Blk Ops

Signatures

/s/ Jullienne, J. Paul, Attorney-in-Fact

05/05/2014

Date

**Signature of Reporting Person

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 transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 25, 2013.
- (2) Includes 22,815 restricted stock units, which may be settled, on a 1-for-1 basis, only in shares of common stock, and 35,768 shares of common stock. Fractional amounts have been rounded to the nearest whole number.

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.

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