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CORELOG	IC, INC.										
Form 4	16										
May 11, 20									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check the check	nger	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31, 2005	
subject Section Form 4	to SIAIE 16.									average rs per	
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations May continue. See Instruction 1(c). Form 5 obligations May continue. See Instruction 1(c). Form 5 obligations May continue. See Instruction 1(c). Form 5 See Instruction 1(c). Form 5 See Instruction 1(c). See Instruction 1(c). 1(c). 1(c). 1(c). 1(c).											
(Print or Type	Responses)										
SANDO BARRY M Symbol					d Ticker or		ng	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (CORELOGIC, INC. [CLGX] 3. Date of Earliest Transaction (Check					k all applicable)			
(Month			(Month/D	Ionth/Day/Year) 5/09/2016				Director 10% Owner X_ Officer (give title Other (specify below) Sr. EVP			
				Amendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person			
WESTLAKE, TX 76262 Form filed by More than One Reporting Person											
(City)	City)(State)(Zip)Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution l any	Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D)	Price	(IIISU: 5 and 4)	(111501.4)		
Common Stock	05/09/2016			М	65,943	А	\$ 18.76	219,670.8205	D		
Common Stock	05/09/2016			S	65,943	D	\$ 36.34 (1)	153,727.8205	D		
Common Stock								6,766.756	Ι	By 401(k) Plan	

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

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information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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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 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. Transactio Code (Instr. 8)	 5. Number of torDerivative Securities 3) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) 		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 18.76	05/09/2016		М		65,943	06/01/2014	05/31/2020	Common Stock	65,943

Reporting Owners

Reporting Owner Name / Address	Relationships						
I. O.	Director	10% Owner	Officer	Other			
SANDO BARRY M CORELOGIC, INC. 1 CORELOGIC WAY WESTLAKE, TX 76262			Sr. EVP				
Signatures							

Angela Grinstead, attorney-in-fact for Barry M. Sando 05/11/2016

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).

The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$36.25 to \$36.48, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and

(1) Inclusive: The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the security inder of the security inder of the issuer, or the security inder of the issuer, or the security inder of the security

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.