FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washii

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ngton, D.C. 20549	OMB APPROVAL

l								
ı	OMB Number:	3235-0287						
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l	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. Name and Address of Reporting Person* <u>Montgomery Michael Curry</u>								and Tic ings,]					(Che	elationship o eck all applic	able)) Perso	on(s) to Issu 10% Ow						
	I HOLDIN	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/08/2015										Officer below)	(give title		Other (s below)	pecify			
(Street)	VILLE C		94608		- 4. l									Line) Form fi Form fi	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																				
		Tab	le I - Nor	-Deriv	vativ	e Se	curit	ies Ac	quire	ed, D	isp	osed o	f, or	Bene	eficiall	y Owned							
Dat				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.							Beneficia Owned F	es II	Form:	Direct (Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership			
									Со	ode \	,	Amount	(1	A) or D)	Price	Reported Transact (Instr. 3 a	ion(s)		[Instr. 4)			
Class A C share	Common Sh	nares, \$0.01 par v	alue per	11/0	8/201	15			N	M		15,47	70	A	\$0 ⁽¹⁾	21,	615		D				
Class A C share	Common Sh	nares, \$0.01 par v	alue per 11/08		8/2015		11/08/2015		2015		J ⁽	(2)		15,47	70	D	\$0 ⁽²⁾	6,	6,145		D		
		7	Fable II - I									sed of, onvertil				Owned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	Code (I		of Deri Secu Acq (A) o Disp of (E	of E		e Exer ation D h/Day/	ate	ble and 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exerc	isable		opiration	Title	O N O	lumber								
Restricted Stock Unit (right to receive)	\$0.0 ⁽¹⁾	11/08/2015			M			15,470	(3	3)		(3)	Class Comm Share \$0.01 value	non es, par per	15,470	\$0	0		D				

Explanation of Responses:

- 1. Restricted stock units convert into common stock on a one-for-one basis.
- 2. The reporting person's employment arrangement requires him to transfer all of the shares that vested on November 8, 2015 to Glendon Capital Management, L.P. The reporting person held these shares for the benefit of Glendon Capital Management, L.P. and had no pecuniary interest in the shares.
- 3. Granted pursuant to the NMI Holdings, Inc. 2012 Stock Incentive Plan. Each restricted stock unit represents a contingent right to receive one NMI Holdings, Inc. common share upon vesting and settlement. The restricted stock unit award is time vested based generally on continued service and is scheduled to vest in equal installments on each of the second and third anniversaries of the date of the grant, which grant occurred on November 8, 2012.

Remarks:

/s/ Nicole C. Sanchez as 11/10/2015 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.