

META FINANCIAL GROUP INC
 Form 4
 January 27, 2016

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2015
 Estimated average burden 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
HAAHR J TYLER

2. Issuer Name and Ticker or Trading Symbol
**META FINANCIAL GROUP INC
 [CASH]**

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
**C/O META FINANCIAL GROUP,
 INC., 5501 SOUTH BROADBAND
 LANE**

3. Date of Earliest Transaction
 (Month/Day/Year)
01/25/2016

Director 10% Owner
 Officer (give title below) Other (specify below)
Chairman of the Board

(Street)
SIoux FALLS, SD 57108

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(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)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D) Code V Amount Price			
Common Stock	01/25/2016		A ⁽¹⁾	370 A \$ 0	88,263	I	By Trust
Common Stock					59,860	D	
Common Stock					324	I	By Spouse
Common Stock					17,684.4788	I	By ESOP

Edgar Filing: META FINANCIAL GROUP INC - Form 4

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.

SEC 1474
(9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities 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)	8. Price or Value of Underlying Securities (Instr. 3 and 4)	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 31.79					09/30/2010	09/30/2020	Common Stock	6,595
Stock Option (Right to Buy)	\$ 23.01					09/30/2009	09/30/2019	Common Stock	8,449
Stock Option (Right to Buy)	\$ 16					09/30/2008	09/30/2018	Common Stock	15,766
Stock Option (Right to Buy)	\$ 39.84					09/28/2007	09/28/2017	Common Stock	7,155
Stock Option (Right to Buy)	\$ 24.43					09/29/2006	09/29/2016	Common Stock	8,940

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

HAAHR J TYLER
C/O META FINANCIAL GROUP, INC.
5501 SOUTH BROADBAND LANE
SIOUX FALLS, SD 57108

X

Chairman of the Board

Signatures

Ashley Menke,
POA

01/27/2016

__Signature of
Reporting Person

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) Award pursuant to the Company's 2002 Omnibus Incentive Plan.

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.