M I HOMES INC Form 4 April 25, 2005

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

may continue. See Instruction 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)

3 EASTON OVAL

1. Name and Address of Reporting Person \* SCHOTTENSTEIN STEVEN

2. Issuer Name and Ticker or Trading

Symbol

M I HOMES INC [MHO]

5. Relationship of Reporting Person(s) to

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

Issuer

(First) (Middle) (Last)

(Street)

3. Date of Earliest Transaction

(Month/Day/Year)

04/21/2005

(Check all applicable) \_X\_\_ Director 10% Owner

X\_ Officer (give title Other (specify below) below)

Vice Chairman and COO

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

Applicable Line)

6. Individual or Joint/Group Filing(Check

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

COLUMBUS, OH 43219

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) (Instr. 3)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I) (Instr. 4) (Instr. 4)

Reported (A) Transaction(s)

(Instr. 3 and 4) Code V Amount (D) Price

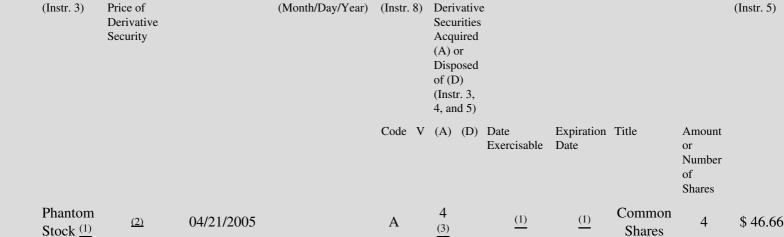
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form 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 Exercisable and	7. Title and Amount of	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Date	Underlying Securities	Derivative
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)	Security

#### Edgar Filing: M I HOMES INC - Form 4



#### **Reporting Owners**

Reporting Owner Name / Address			Relationships	ips	
	Director	10% Owner	Officer	Other	
SCHOTTENSTEIN STEVEN 3 EASTON OVAL COLUMBUS, OH 43219	X		Vice Chairman and COO		

## **Signatures**

Phillip G. Creek, attorney-in-fact for Steven Schottenstein 04/25/2005

\*\*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).
- The Phantom Stock units accrue under the M/I Homes, Inc. Executives' Deferred Compensation Plan (the "Plan") and are to be settled in (1) Common Shares upon the earlier of (i) the date specified by the reporting person in his deferral notice, or (ii) the date of the reporting person's termination as an employee of M/I Homes, Inc.
- (2) 1-for-1
- (3) Represents Phantom Stock units credited to the reporting person's Deferred Compensation Account under the Plan for dividends accrued on Common Shares underlying Phantom Stock units held by the reporting person under the 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.

Reporting Owners 2