## Edgar Filing: Bunge LTD - Form 4

Bunge LTD												
Form 4												
October 03, 20	)14											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB AF	OMB APPROVAL		
	UNITED	STATES		ATTIES Shingtor				NGE C	COMMISSION	OMB Number:	3235-0287	
Check this if no longer										Expires:	January 31	
subject to	STATEM	IENT OI	F CHAN	ANGES IN BENEFICIAL OWN					NERSHIP OF	Estimated a	2005 Iverage	
Section 16.		SECURITIES						burden hours per				
Form 4 or Form 5	Ella danna	Filed pursuant to Section 16(a) of the Securities Exchange						a A at af 1024	response (			
obligations									e Act of 1934, f 1935 or Sectior			
may contin	ue.		of the In							1		
See Instruct 1(b).	tion	50(II)	or the m	vestiller	n C	ompan	y At		rO			
1(0).												
(Print or Type Re	sponses)											
1. Name and Address of Reporting Person *       2. Issuer Name and Ticker or Trading         Hardie Gordon       Symbol				5. Relationship of Reporting Person(s) to Issuer								
			Symbol Bunge LTD [BG]									
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)				
			(Month/Day/Year)					Director	10%	Owner		
			10/01/2014						X_Officer (give titleOther (specify			
STREET, 6TI	H FLOOR								below) MD, Fo	below) od & Ingredier	nts	
			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
			Filed(Month/Day/Year)						Applicable Line)			
_X_ Form					_X_ Form filed by O	d by One Reporting Person						
WHITE PLA	INS, NY 10606								Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-	-Der	rivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deen	ned	3.	4	4. Securi	ties A	- cauired	5. Amount of	6. Ownership	7. Nature of	
	(Month/Day/Year)	Execution		Transac	tion(	(A) or Di	spose	d of (D)	Securities	Form: Direct		
(Instr. 3)		Code (Instr. 3, 4 and 5)					5)	2		Beneficial		
		(Month/L	Day/Year)	(Instr. 8	)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
							(1)		Reported	(	(	
							(A) or		Transaction(s)			
				Code	V A	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	10/01/2014			F <u>(1)</u>	1	1,332	D	\$ 83.22	7,619	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Hardie Gordon C/O BUNGE LTD. 50 MAIN STREET, 6TH FLOOR WHITE PLAINS, NY 10606			MD, Food & Ingredients					
Signatures								
/s/ John Tropeano, Attorney-in-Fact	10/03/2014	4						
**Signature of Reporting Person	Date							
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## **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) Withholding of common stock for the payment of tax liability incident to the vesting of restricted stock units.

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.