Edgar Filing: SUN LIFE FINANCIAL INC - Form 4

SUN LIFE FI	NANCIAL IN	IC										
Form 4 November 10,	2010											
	Л										/AL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Numb	er:	5-0287	
Check this if no longer									Expire	es: Janu	ary 31, 2005	
subject to	subject to Section 16. SECURITIES							KSHIP OF	burde	ated average n hours per	9	
Form 5 obligations may contin <i>See</i> Instruct 1(b).	ue. Section 1	7(a) of the	Section 16 Public Util of the Inv	lity Holdi	ng Compa	any A	ct of 193	ct of 1934, 35 or Sectio	respo	nse	0.5	
(Print or Type Re	sponses)											
Sun Life Assurance CO of Canada Symbol				Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			Kayne An CO [KY]		ALP Inves	tmen	t	(Chec	k all app	licable)		
(Last) 150 KING ST	(First)	(Middle)	3. Date of I (Month/Da) 05/07/20	y/Year)	nsaction		belo			10% Owner Other (speci w)		
TORONTO, 4	(Street) A6 M5H 1J9		4. If Amend Filed(Month		e Original		$\frac{App}{X}$	ndividual or Jo blicable Line) Form filed by C Form filed by M	ne Report	ting Person	٤	
(City)	(State)	(Zip)	Table	I . Non-De	rivative Sec	uritie	Pers	^{son} d, Disposed of	or Ben	eficially Owr	ed	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Execut any		3.	4. Securitie onDisposed o (Instr. 3, 4	es Acqu f (D)	uired (A) o	or 5. Amo Securit Benefi Ownec Follow Report Transa	ount of ies cially ing ed ction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Mandatory Redeemable Preferred	11/09/2010			Code V P	Amount 440,000	(D)	Pric	e 1.040	3 and 4)	D		
Shares Series C							11,000	,000				
Mandatory Redeemable Preferred Shares Series C	11/09/2010			Р	440,000	А	\$ 11,000	,000 1,040	,000	I	See Below	

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

Edgar Filing: SUN LIFE FINANCIAL INC - Form 4

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)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. Mumber	6. Date Exerce Expiration Da		7. Titl Amou		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Monur Day) Tear)	(Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/ e		Under Securi	lying	Security (Instr. 5)	Secur 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		Relationsh	ips	
	Director	10% Owner	Officer	Other
Sun Life Assurance CO of Canada 150 KING STREET WEST TORONTO, A6 M5H 1J9		Х		
SUN LIFE FINANCIAL INC SUN LIFE ASSURANCE CO OF CANADA 150 KING STREET WEST SUITE 1400 TORONTO, A6		Х		
Signatures				

Signatures

/s/ John T. Donnelly, Senior Managing Director - Investment Products and Strategies on behalf of Sun Life Assurance Company of Canada					
**Signature of Reporting Person	Date				
/s/ Ann King, Authorized Signer for Sun Life Assurance Company of Canada	11/10/2010				
<u>**</u> 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).

Remarks:

Edgar Filing: SUN LIFE FINANCIAL INC - Form 4

Sun Life Financial Inc. owns 100% of the outstanding shares of common stock of Sun Life Assurance Company of Canada, th

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.