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Olson Gary Form 4 March 13, 2								
FORM	14				- ~ ~		PPROVAL	
	UNITED SI		RITIES AND E ushington, D.C.		E COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to STATEMENT OF C					WNERSHIP OF	Expires: Estimated a		
Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Section 16. 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)							
Olson Gary S Symbol			er Name and Ticker Bancorp, Inc. [E	-	5. Relationship of Issuer	o of Reporting Person(s) to		
(Last)				-	(Chec	eck all applicable)		
200 PALMER STREET 03/09/20			Day/Year) 2018		below)	X Officer (give title Other (specify		
	(Street)		endment, Date Orig	inal	6. Individual or Jo	oint/Group Filin	1g(Check	
STROUDS	BURG, PA 18360	Filed(Mo	onth/Day/Year)		Applicable Line) _X_ Form filed by C Form filed by M Person	One Reporting Pe fore than One Re		
(City)	(State) (Z	^{ip)} Tal	ole I - Non-Derivati	ve Securities	Acquired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)			Transaction(A) or Code (Instr.	urities Acquire Disposed of (3, 4 and 5) (A) or	D) Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
~			Code V Amou	int (D) Pr				
Common Stock	03/09/2018		M 5,000	$A + \frac{\$}{12}$	73,860 (2) (3) (4) (5) (4) (5)	D		
Common Stock	03/09/2018		F 4,412	2 D ^{\$} 14.	$\begin{array}{c} 69,448 \ \underline{(2)} \ \underline{(3)} \\ 75 \ \underline{(4)} \ \underline{(5)} \end{array}$	D		
Common Stock					40,627 <u>(1)</u>	Ι	By 401(k)	
Common Stock					130	I	By Spouse's IRA 1	
Common Stock					136	Ι	By Spouse's	

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IRA 2

Common	12 211 (1)	т	
Stock	12,311 <u>(1)</u>	1	By ESOP

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)

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. Transactio Code (Instr. 8)	5. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci Expiration Dat (Month/Day/Y	te	7. Title and A Underlying S (Instr. 3 and	Securities	8. D S (I
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 12.35	03/09/2018		М	5,000	05/23/2009	05/23/2018	Common Stock	5,000	

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Olson Gary S 200 PALMER STREET STROUDSBURG, PA 18360	Х		President and CEO			
Signatures						
/s/ Marc P. Levy, pursuant to power of attorney			03/13/2018			

**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) Reflects transactions not required to be reported pursuant to Section 16 of the Securities Exchange Act of 1934, as amended.

(2) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2015.

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(3) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2016.

(4) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2017...

(5) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2018.

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.