### Edgar Filing: BROOKLINE BANCORP INC - Form 5

**BROOKLINE BANCORP INC** Form 5 February 14, 2014 FORM 5

Check this box if

no longer subject

to Section 16.

5 obligations

may continue. See Instruction

1(b).

Reported

(Middle)

Form 4 Transactions Reported

(Last)

(First)

(Street)

131 CLARENDON STREET

BOSTON, MAÂ 02117

Form 4 or Form

#### **OMB APPROVAL** OMB UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 January 31, Expires: 2005 Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL burden hours per **OWNERSHIP OF SECURITIES** response... 1.0 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer ROSE M ROBERT Symbol **BROOKLINE BANCORP INC** (Check all applicable) [BRKL]

Director 10% Owner Other (specify \_X\_\_ Officer (give title below) below) Chief Credit Officer

6. Individual or Joint/Group Reporting

(check applicable line)

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

(City)	(State) (2	Zip) Table	e I - Non-Deri	vative Sec	curitie	s Acqu	ired, Disposed o	f, or Beneficial	ly 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. Securi Acquired Disposed (Instr. 3, Amount	d (A) of d of (D 4 and (A) or	))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	Â	Â	Â	Â	Â	Â	4,775 <u>(1)</u>	Ι	By IRA
Common Stock	Â	Â	Â	Â	Â	Â	6,250 <u>(1)</u>	I	By M. Robert Rose Trust
Common Stock	Â	Â	Â	Â	Â	Â	1,500	Ι	By ESOP
Common Stock	Â	Â	Â	Â	Â	Â	22,092 <u>(2)</u>	D	Â

3. Statement for Issuer's Fiscal Year Ended

(Month/Day/Year)

Filed(Month/Day/Year)

4. If Amendment, Date Original

12/31/2013

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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 2270 (9-02)

# 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 Exer	cisable and	7. Titl	le and	8. Price of	9.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative	of
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	D
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Se
	Derivative				Securities			(Instr.	. 3 and 4)		В
	Security				Acquired						0
					(A) or						E
					Disposed						Is
					of (D)						Fi
					(Instr. 3,						(I
					4, and 5)						
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director 10% Owned		Officer	Other			
ROSE M ROBERT 131 CLARENDON STREET BOSTON, MA 02117	Â	Â	Chief Credit Officer	Â			
Signatures							
M. Robert Rose, by Michael W POA	dy,	02/14/2014					
**Signature of Reporting Perso		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) Previously reported as direct ownership.
- (2) Includes shares of restricted stock granted pursuant to the Brookline Bancorp, Inc. 2011 Restricted Stock Plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.