### Edgar Filing: Michael Mark C - Form 4

Michael Ma Form 4 May 15, 20												
FORM	ЛЛ								01000000		PPROVAL	
UNITED STATES SECO					RITIES AND EXCHANGE COM ashington, D.C. 20549					OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Section 17(a) of the Pur 30(h) of				NGES SEC 16(a) o Itility 1	IN CUF of th Hol	BENER RITIES ne Securi ding Co	FICLA ities I mpan	Exchange	e Act of 1934, 1935 or Section	Expires: Estimated burden ho response	urs per	
1(b).						•	•					
(Print or Type	Responses)											
1. Name and A Michael M	Address of Reporting ark C	Person <u>*</u>	Symbol	Y SPR		d Ticker o G BANC		-	5. Relationship of Issuer (Chec	Reporting Pe		
	(First) ( PRING BANCOR 1 GEORGIA AV		-	of Earlie Day/Yea		ransaction			_X_ Director Officer (give below)		% Owner ner (specify	
OLNEY, M	(Street)		4. If Am Filed(Mo			ate Origin r)	al		6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by M	One Reporting F	erson	
(City)	(State)	(Zip)	Tab	La L N	I	Domination	See	witing A age	Person	on Donoficio	lly Ormed	
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed			actic 8)	4. Securi on(A) or Di (Instr. 3,	ties A ispose	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	or Beneficially Owned 6. 7. Nature of Ownership Indirect Form: Beneficial Direct (D) Ownership or Indirect (Instr. 4) (I) (Instr. 4)		
Common Stock	05/10/2018			S	v	1,000	D		87,590	D		
Common Stock	05/11/2018			S		1,000	D	\$ 40.73	86,590	D		
Common Stock	05/14/2018			S		1,000	D	\$ 40.613 (1)	85,590	D		
Common Stock									1,815	I	Owned by Occasions Caterers	

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Common	655	D <sup>(2)</sup>
Stock	655	D <u>(-)</u>

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 Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transactio	5. Mumber	6. Date Exerce Expiration D		7. Title Amoun		8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day/		Underly		Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	` <b>`</b>	1000)	Securiti	U	(Instr. 5)	Bene
(1115417-0)	Derivative		(1.101111/2/45/ 1.041)	(1115111-0)	Securities			(Instr. 3		(insure)	Owne
	Security				Acquired			(111501.5	and i)		Follo
	Security				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(Instr
					4, and 5)						
					., und c)						
								A	Amount		
						Date	Expiration		or		
						Exercisable	Date	Title N	Number		
						Entrensment Build	0	of			
				Code V	(A) $(D)$			S	Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Michael Mark C SANDY SPRING BANCORP, INC. 17801 GEORGIA AVENUE OLNEY, MD 20832	Х						
Signatures							
/s/ Janet VA Replogle, attorney-in-fac Michael	t for Mr.		05/15/	2018			
<u>**</u> Signature of Reporting Person			Date	e			

## **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 price reported is the weighted average price of trades occurring in a single day and within a range of \$1.00. Upon request of the (1) Commission, the Company, or a security holder of the Company, full information regarding the number of shares purchased or sold at each separate price will be provided.

(2) Restricted stock awarded under 2015 Omnibus Incentive Plan vests in equal installments annually for three years beginning April 1, 2019.

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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.