BRYN MAWR BANK CORP

Form 5

February 12, 2015

FORM	15							OMB A	PPROVAL		
. •	_	STATES SECU				E C	OMMISSION	OMB Number:	3235-0362		
Check the no longer		ashington, D	eshington, D.C. 20549 ENT OF CHANGES IN BENEFICIAL RSHIP OF SECURITIES					January 31,			
to Section Form 4 o 5 obligati may cont See Instru	n 16. r Form ANN ions inue. uction	ERSHIP OF S						2005 average irs per 1.0			
1(b). Form 3 H Reported Form 4 Transacti Reported	Holdings Section 17(a			g Compa	ny A	ct of	1935 or Section	on			
Gilbert Andrea F			Issuer Name and Ticker or Trading /mbol RYN MAWR BANK CORP				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(Last) (First) (Middle) 3. S			Statement for Issuer's Fiscal Year Ended Month/Day/Year) 2/31/2014				_X_ Director 10% Owner Officer (give title Other (specify below)			
C/O BRYN HOSPITAI MAWR AV	L, 130 SOUTH B										
			nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)				
BRYN MA	WR, PA 19010)					_X_ Form Filed by Form Filed by Person				
(City)	(State)	Zip) Ta	ble I - Non-Deri	ivative Sec	urities	Acqu	ired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of Issuer's	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Amount	(A) or (D)	Price	Fiscal Year (Instr. 3 and 4)	(IIISu. +)	(mou. 1)		
Common Stock	Â	Â	Â	Â	Â	Â	13,147	D	Â		
	port on a separate line eficially owned directly		contained in	n this fori	m are	not re	llection of info equired to resp lid OMB contr	ond unless	SEC 2270 (9-02)		

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. Transaction Code (Instr. 8)	Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options to Purchase Common Stock (1)	\$ 18.91	Â	Â	Â	Â	Â	05/12/2005	05/12/2015	Common Stock	3,500
Options to Purchase Common Stock (1)	\$ 21.21	Â	Â	Â	Â	Â	12/12/2005	12/12/2015	Common Stock	3,500
Options to Purchase Common Stock (2)	\$ 22	Â	Â	Â	Â	Â	08/29/2009(3)	08/29/2017	Common Stock	3,500
Options to Purchase Common Stock (2)	\$ 24.27	Â	Â	Â	Â	Â	08/18/2009 <u>(4)</u>	08/18/2018	Common Stock	3,500
Options to Purchase Common Stock (2)	\$ 18.27	Â	Â	Â	Â	Â	08/21/2010 <u>(5)</u>	08/21/2019	Common Stock	4,475

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Gilbert Andrea F	ÂX	Â	Â	Â			
C/O BRYN MAWR HOSPITAL							
130 SOUTH BRYN MAWR AVENUE							

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BRYN MAWR. PAÂ 19010

Signatures

/s/ Diane McDonald, Attorney-in-Fact

02/12/2015

**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) These options were granted to the reporting person under BMBC's 2004 Stock Option Plan in a transaction exempt under Rule 16-b.
- (2) These options were granted to the reporting person under BMBC's 2007 Long-term Incentive Plan.
- (3) These options become exercisble over a five (5) year period in 20% increments starting on 8/29/2008 and on each 8/29 threafter until the options are fully exercisable.
- (4) These options become exercisable over a five (5) year period in 20% increments starting on 8/18/2009 and on each 8/18 thereafter until the options are fully exercisable.
- (5) These options become exercisable over a five year period in 20% increments starting on 8/21/2010 and on each 8/21 thereafter until the options are fully exercisable.

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.

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