## Edgar Filing: TriState Capital Holdings, Inc. - Form 4

TriState Capital Holdings, Inc. Form 4 September 16, 2014

September 1	6, 2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
		SIAILS		shington,			INGE (	.0101101155101	OMB Number:	3235-0287	
Check the if no long	Ter								Expires:	January 31, 2005	
subject to Section 1 Form 4 o	6. r	STATEMENT OF CHANGES IN BI SECURIT						Estimated average burden hours per response 0			
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17	(a) of the	Public U		ding Con	npan	y Act of	e Act of 1934, 1935 or Sectio 0	'n		
(Print or Type I	Responses)										
Sullivan Mark L. Symbol								5. Relationship of Reporting Person(s) to Issuer			
		0.0.1.11. \		e Capital I	c	, me	. [150]	(Check all applicable)			
				e of Earliest Transaction h/Day/Year) //2014				X Director 10% Owner X Officer (give title Other (specify below) below) VICE CHAIRMAN AND CFO			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PITTSBUR	GH, PA 15219							Form filed by M Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secu	rities Acq	uired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deem Execution any (Month/D			Date, if Transaction(A) or Dis Code (Instr. 3, 4 ay/Year) (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/12/2014			P	2,500	A	\$ 9.488 (1)	5,000	I	By FMT Co Custodian for IRA Rollover FBO Mark L. Sullivan	
Common Stock								100,045	D		

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.

Date

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)	4. Transactio Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans
				of (D) (Instr. 3, 4, and 5)				Amount		(Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting 6 wher Funct Fruitess	Director	10% Owner	Officer	Other				
Sullivan Mark L. ONE OXFORD CENTRE 301 GRANT STREET, SUITE 2700 PITTSBURGH, PA 15219	Х		VICE CHAIRMAN AND CFO					
Signatures								
/s/ Keevican Weiss Bauerle & Hirsch L		09/10/2014						

Attorney-in-Fact

\*\*Signature of Reporting Person

## **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 in Column 4 is the average price. The shares were purchased in multiple transactions at prices ranging from \$9.46 to \$9.49, inclusive. The Reporting Person undertakes to provide to any security holder of TriState Capital Holdings, Inc. or the staff of the (1) Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.

(2) Mr. Sullivan is the beneficiary of this account.

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.