#### Edgar Filing: FOGAL CHRISTOPHER E - Form 4

#### FOGAL CHRISTOPHER E

Form 4

February 06, 2019

# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287

0.5

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

**OMB APPROVAL** 

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Form 4 or Form 5 obligations may continue.

See Instruction

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

1(b).

(Print or Type Responses)

1. Name and A FOGAL CH	2. Issuer Name <b>and</b> Ticker or Trading Symbol SEACOAST BANKING CORP OF FLORIDA [SBCF]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)					
(Last)	(First) (M	Aiddle)	3. Date of Earliest Transaction			_X_ Director		6 Owner er (specify		
SEACOAST BANKING CORP. OF FLORIDA, P. O. BOX 9012			(Month/D) 02/04/20	•			below)	below)	or (specify	
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
STUART, FL 34995							Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurities Ac	quired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution	emed on Date, if /Day/Year)	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D)	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							11,361	D		
Common Stock							12,570.65	D (1)		
Common Stock							4,490	D (2)		
Common Stock							2,738	I	Held by spouse in	

trust

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

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. Transacti Code (Instr. 8)	()	5. Numb of Deriv Securities Acquired (A) or Disposed (D) (Instr. 3, and 5)	ative es d	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	7	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Commonn Stock Right to Buy (3)	\$ 28.42	02/04/2019		A(4)		1,146		02/04/2019	02/03/2029	Common Stock	1,146
Commonn Stock Right to Buy (3)	\$ 27.53							05/04/2018	05/03/2028	Common Stock	1,431
Commonn Stock Right to Buy (3)	\$ 22.65							02/06/2017	02/05/2027	Common Stock	2,142
Common Stock Right to Buy (3)	\$ 14.39							02/03/2016	02/02/2026	Common Stock	3,419

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
. 0	Director	10% Owner	Officer	Other		
FOGAL CHRISTOPHER E SEACOAST BANKING CORP. OF FLORIDA P. O. BOX 9012 STUART, FL 34995	X					

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# **Signatures**

/s/ Dennis S. Hudson, III as Power of Attorney for Christopher E. Fogal

02/06/2019

\*\*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) Held in Seacoast's Non-employee Directors Deferred Compensation Plan
- (2) Held jointly with spouse
- (3) Granted pursuant to Seacoast Banking Corporation of Florida's 2013 Incentive Plan
- (4) Non-employee director compensation granted in the form of options as elected by the recipient; the number of shares and purchase price determined using the Black-Scholes method.

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.

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