#### **BRYN MAWR BANK CORP**

Form 4

August 22, 2016

### FORM 4

Check this box

if no longer

subject to

Section 16.

Form 4 or

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

OMB

3235-0287 Number:

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**OMB APPROVAL** 

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

MCKEE LYNN

2. Issuer Name and Ticker or Trading

Symbol

BRYN MAWR BANK CORP

[BMTC]

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable) 3. Date of Earliest Transaction

(Month/Day/Year)

Officer (give title below)

X\_ Director

10% Owner Other (specify

ARAMARK CORPORATION, 1101 08/18/2016

(Middle)

(Zip)

(First)

MARKET ST.

(City)

Stock

(Last)

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

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

Person

PHILADELPHIA, PA 19107-2988

(State)

08/18/2016

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially (D) or Owned Following (Instr. 4)

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Ownership Indirect (I) (Instr. 4)

Reported (A) Transaction(s)

or (Instr. 3 and 4)

Code V Amount Price (D)

Common

(Month/Day/Year)

\$0 1.274 Α 3,602 D

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

A

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)

#### Edgar Filing: BRYN MAWR BANK CORP - Form 4

| 1. Title of | 2.          | 3. Transaction Date |                    | 4.         | 5.         | 6. Date Exerc       |                 | 7. Titl |          | 8. Price of | 9. Nu    |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------------|-----------------|---------|----------|-------------|----------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transacti  | orNumber   | Expiration D        | ate             | Amou    | ınt of   | Derivative  | Deriv    |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/         | Year)           | Under   | lying    | Security    | Secui    |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e                   |                 | Securi  | ities    | (Instr. 5)  | Bene     |
|             | Derivative  |                     | •                  |            | Securities | 3                   |                 | (Instr. | 3 and 4) |             | Owne     |
|             | Security    |                     |                    |            | Acquired   |                     |                 |         |          |             | Follo    |
|             |             |                     |                    |            | (A) or     |                     |                 |         |          |             | Repo     |
|             |             |                     |                    |            | Disposed   |                     |                 |         |          |             | Trans    |
|             |             |                     |                    |            | of (D)     |                     |                 |         |          |             | (Instr   |
|             |             |                     |                    |            | (Instr. 3, |                     |                 |         |          |             | (2.11541 |
|             |             |                     |                    |            | 4, and 5)  |                     |                 |         |          |             |          |
|             |             |                     |                    |            | i, and 3)  |                     |                 |         |          |             |          |
|             |             |                     |                    |            |            |                     |                 |         | Amount   |             |          |
|             |             |                     |                    |            |            | Data                | Evaluation      |         | or       |             |          |
|             |             |                     |                    |            |            | Date<br>Exercisable | Expiration Date | 1 itie  | Number   |             |          |
|             |             |                     |                    |            |            |                     |                 |         | of       |             |          |
|             |             |                     |                    | Code V     | (A) (D)    |                     |                 |         | Shares   |             |          |

# **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |         |       |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|
| . 9   | Director      | 10% Owner | Officer | Other |  |  |  |
| MCKEE LYNN<br>ARAMARK CORPORATION<br>1101 MARKET ST.<br>PHILADELPHIA, PA 19107-2988 | X             |           |         |       |  |  |  |

## **Signatures**

/s/ Diane McDonald, Attorney-in-Fact 08/22/2016

\*\*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).

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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