Edgar Filing: SLUTZKY PAUL - Form 4

SLUTZKY F Form 4 June 15, 201	1									
OMB APPROVAL UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB										
Check th		Washington, D.C. 20549						OMB Number:	3235-0287	
if no long	ger STATEME		JCES IN	PENEE	тста		VEDSUID OF	Expires:	January 31, 2005	
subject to Section 1 Form 4 o Form 5	6. r Filed pursu	STATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange						Estimated a burden hou response	•	
obligations may continue.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).1(b).										
(Print or Type I	Responses)									
SLUTZKY PAUL Symbol			er Name and Ticker or Trading NE COUNTY BANCORP				5. Relationship of Reporting Person(s) to Issuer			
		INC [GCBC]					(Check all applicable)			
(Month/D			te of Earliest Transaction th/Day/Year) 3/2011				_X_ Director10% Owner Officer (give titleOther (specify below) below)			
	ndment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
CATSKILL, NY 12414 Form filed by More than One Reporting Person									porting	
(City)	(State) (Zi	ip) Tab	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2 (Month/Day/Year) H	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
C			Code V	Amount	(D)	Price	(Instr. 5 and 4)			
Common Stock	06/13/2011		S	36	D	\$ 17.53	15,964 <u>(1)</u>	Ι	By Estate	
Common Stock	06/13/2011		S	199	D	\$ 17.51	15,765 <u>(1)</u>	Ι	By Estate	
Common Stock	06/13/2011		S	765	D	\$ 17.5	15,000 <u>(1)</u>	Ι	By Estate	
Common Stock							32,500	D		
Common Stock							3,740	I	By Children	

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

Persons who respond to the collection of information contained in this form are not 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 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. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. l De Sea (In
Stock Options	\$ 12.5			Code V	(A) (D)	Date Exercisable 06/30/2009 <u>(2)</u>	Expiration Date 08/19/2018	Title Common Stock	Amount or Number of Shares 6,000	

Reporting Owners

Reporting Owner Name / Addre	55	Relationships							
reporting o mar raine / raune	Director	10% Owner	Officer	Other					
SLUTZKY PAUL 302 MAIN STREET CATSKILL, NY 12414	Х								
Signatures									
/s/ Paul E. Slutzky	06/15/2011								

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The reporting person disclaims ownership of 2/3 of the shares held by his mother's estate of which he is a co-executor and beneficiary.
- (2) The stock options will vest at a rate of one-third per Company fiscal year assuming certain cumulative earnings performance criteria are met.

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.

Reporting Owners

**Signature of

Reporting Person