## Edgar Filing: REPUBLIC BANCORP INC /KY/ - Form 4

REPUBLIC I Form 4 April 02, 201	3ANCORP INC 4	/KY/										
FORM	1										PPROVAL	
	UNITED	STATES				ND EXC D.C. 205		NGE (	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or						CIA	LOW	NERSHIP OF	burden hou	Expires: January 31, 2005 Estimated average burden hours per response 0.5		
Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed pur s Section 17(	a) of the		ility Ho	old	ing Com	pany	Act of	e Act of 1934, f 1935 or Section 40	·	0.5	
(Print or Type R	esponses)											
Rust Michael T Symbol				r Name <b>and</b> Ticker or Trading BLIC BANCORP INC /KY/ Al					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 601 W MAR		Middle)	3. Date of (Month/Da 03/31/20	ay/Year)		insaction			X_ Director Officer (give below)		Owner er (specify	
				endment, Date Original nth/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
LOUISVILL	.E, KY 40202								Form filed by N Person	lore than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non	-De	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executio any	med n Date, if Day/Year)	Code (Instr. 8	8)	n(A) or Di (D)	spose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Class A				2000		mount	(2)	¢				
Common Stock	03/31/2014			А		302	А	ъ 22.6	10,032	D		

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

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# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Rust Michael T 601 W MARKET ST LOUISVILLE, KY 40202	Х							
Signatures								
Kevin Sipes, Attorney-in-Fact	04/02/	/2014						

\*\*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.