Edgar Filing: KUIPER JEREMY L - Form 4

KUIPER JEI	REMY L										
Form 4	0										
May 17, 2018									OMB APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287			
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation	GES IN BENEFICIAL OWN SECURITIES 6(a) of the Securities Exchange				e Act of 1934,	Expires: Estimated a burden hou response	rs per				
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section See Instruction 30(h) of the Investment Company Act of 1940 1(b).											
(Print or Type F	Responses)										
1. Name and A KUIPER JE	ssuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer						
	(First) (M	-	Bancorp, Inc. [TBBK]				(Check all applicable)				
(Last) C/O THE B SILVERSIE	(Month/D	Date of Earliest Transaction onth/Day/Year) /16/2018				Director10% Owner Officer (give titleOther (specify below) EVP, Head of Payment Solutions					
	(Street) 4. If Amendment, Filed(Month/Day/Ye				-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WILMING	FON, DE 19809						Form filed by M	filed by More than One Reporting			
(City)	(State) (Zip) Tabl	le I - Non-D	erivative S	ecuri	ties Acc	uired, Disposed of	f, or Beneficial	lly Owned		
(Instr. 3) any		Execution Date, if any	Code	Transaction(A) or Disposed of			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	05/16/2018		А	27,100	А	<u>(1)</u>	520,805	D			
Common Stock							1,641	Ι	By 401(k) plan account		

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.

Edgar Filing: KUIPER JEREMY L - Form 4

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

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KUIPER JEREMY L C/O THE BANCORP, INC. 409 SILVERSIDE ROAD WILMINGTON, DE 19809			EVP, Head of Payment Solutions				
Signatures							
/s/Paul Frenkiel,	05/	/17/2018					

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).

The Reporting Person was granted restricted stock units, each of which represents the right to receive one share of common stock of The Bancorp, Inc. upon vesting. The restricted stock units shall vest in three equal installments over a period of two years and nine months

(1) Balcorp, file, apoil vesting. The restricted stock units shart vest in three equal installments over a period of two years and fine months from the date of grant, with the first installment vesting on the first annual anniversary of the date of grant, the second installment on the second annual anniversary thereafter, and the third installment 9 months after the second installment.

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.

attorney-in-fact

**Signature of Reporting Person