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INDEPEND Form 4 March 22, 20	ENT BANK C	ORP									
									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 chligations				NGES IN BENEFICIAL OWNERSHIP OF SECURITIES 16(a) of the Securities Exchange Act of 1934, Itility Holding Company Act of 1935 or Sectior					Expires: January 31, 2005 Estimated average burden hours per response 0.5		
may cont <i>See</i> Instru 1(b).	inue.			ivestment	•	-	•				
(Print or Type I	Responses)										
1. Name and A	Address of Reporti			r Name and	I Ticker of	r Tradi	ing	5. Relationship of I Issuer	Reporting Pers	on(s) to	
ODDLEIFSON CHRISTOPHER Symbol INDEP [INDB]				EPENDENT BANK CORP				(Check all applicable)			
				e of Earliest Transaction n/Day/Year) /2016				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) President and CEO			
Filed(Mont				endment, Date Original onth/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 			
ROCKLAN	D, MA 02370							Person		Jorting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution any		3. Transactic Code (Instr. 8)	(Instr. 3,	ispose 4 and (A) or	d of (D) 5)	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	03/20/2016			Code V F	Amount 938	(D) D	Price \$ 47.555	107,777	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. iorNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
Treforming of the same (same as	Director	10% Owner	Officer	Other				
ODDLEIFSON CHRISTOPHER C/O INDEPENDENT BANK CORP. 288 UNION STREET ROCKLAND, MA 02370	Х		President and CEO					
Signatures								
/s/ Sarah E. Hutchings, Power of Attor Oddleifson	mey for C	hristopher	03/22/2	016				
**Signature of Reporting	Date	e						

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.