## Edgar Filing: MID PENN BANCORP INC - Form 4

Form 4	BANCORP INC									
July 27, 201	ЛЛ	STATES SECUI	RITIES A	ND EXO	CHAI	NGE	COMMISSION	-	PPROVAL	
Check th if no long subject to Section 1 Form 4 c Form 5 obligatio may cont See Instr 1(b).	iis box ger 16. or Filed pur <sup>nns</sup> Section 17(	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type ]	Responses)									
Williams Edward P. Syn			2. Issuer Name <b>and</b> Ticker or Trading Symbol MID PENN BANCORP INC [MPB]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I	Middle) 3. Date o	3. Date of Earliest Transaction (Check				ck all applicabl	c all applicable)		
4329 VALI	LEYVIEW ROAI		Day/Year) 2015				Director X Officer (giv below)		% Owner er (specify	
			mendment, Date Original Month/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></ul>			
HARRISBU	JRG, PA 17112						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip) Tab	le I - Non-D	erivative	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution Date, if any			l of (D	))	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Mid Penn Bancorp,			Code V	Amount	(D)	Price				
Inc. Common Stock <sup>(1)</sup>	07/24/2015		А	400	А	\$0	1,360.226 <u>(2)</u>	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.

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

## **Reporting Owners**

Reporting Owner Name / Address	5	Relationships							
I O	Director	10% Owner	Officer	Other					
Williams Edward P. 4329 VALLEYVIEW ROAD HARRISBURG, PA 17112			Interim PFO						
Signatures									
/s/ Edward P. O Williams	07/27/2015								
<u>**</u> Signature of	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).
- Shares granted in the form of restricted stock, which vests, subject to acceleration upon certain occurrences, 25% on each anniversary of
  (1) the date of grant (each, a "vesting tranche"), but only if such reporting person (i) remains continuously employed through the applicable anniversary date and (ii) during each vesting tranche, purchases and holds an equal number of shares.
- (2) Balance includes shares acquired through Employee Stock Purchase Plan and Dividend Reinvestment Plan.

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 Person