## Edgar Filing: NICHOLAS FINANCIAL INC - Form 4

Form 4 April 22, 20 <b>FORN</b> Check ti if no lor subject Section Form 4 Form 5 obligation may cor <i>See</i> Inst 1(b).	<b>A 4</b> his box his box his box for or ons ntinue. His box STATEN Filed put Section 170	STATES MENT O rsuant to ( (a) of the	Wa F CHAN Section 1 Public U	shington NGES IN SECUI (6(a) of th (tility Hol	, D.C. 205 BENEFI RITIES ne Securition	5 <b>49</b> CIAI es Ex pany	<b>OWN</b> change Act of	DMMISSION ERSHIP OF Act of 1934, 1935 or Sectior	OMB Number: Expires: Estimated a burden hou response	•	
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> MAHAN GARY				2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			Symbol NICHOLAS FINANCIAL INC [NICK]					(Check all applicable)			
(Last)	(First) (	Middle)		of Earliest T Day/Year)	ransaction			Director Officer (give t		6 Owner er (specify	
53 CROSS ROAD			03/19/2015					below) below)			
				Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
BASKING RIDGE, NJ 07931 Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative S	ecurit	ies Acqu	ired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		n Date, if	3. Transactio Code (Instr. 8) Code V	4. Securitie our Dispose (Instr. 3, 4 Amount	d of (Ē	))	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 (1)	03/19/2015			S	354,411	D	\$ 14.85	87,399	I <u>(2)</u>	By Mahan Children II, LLC (3)	
Common Stock (1)	03/19/2015			S	320,068	D	\$ 14.85	332,838	I <u>(2)</u>	By Mahan Family II, LLC <u>(3)</u>	

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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	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 / Addres	S	Relationships							
1	Director	Director 10% Owner		Other					
MAHAN GARY									
53 CROSS ROAD		Х							
BASKING RIDGE, NJ 0793	1								
Signatures									
/s/ Gary Mahan	04/22/2015								
<u>**</u> 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).
- (1) All share numbers reflect a 10% stock dividend paid on December 7, 2009.
- (2) The reporting person is a manager and equity holder of the limited liability company that owns the reported securities. The reporting person disclaims beneficial ownership of the reported securities except to the extent of the reporting person's pecuniary interest therein.

Mahan Children II, LLC and Mahan Family II, LLC are the successors in interest to Mahan Children, LLC and Mahan Family, LLC,(3) respectively, and each of such entities is identical in all material respects to its predecessor except that its state of organization is Florida rather than New Jersey.

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.