Edgar Filing: SALISBURY BANCORP INC - Form 4

Form 4				
Form 4 May 18, 2016				
May 18, 2016	OMB AP	PROVAL		
	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or	Expires: January 3 200 Estimated average burden hours per response 0.			
Form 5 obligations may continue. See Instruction 1(b). 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				
(Print or Type Responses)				
PEROTTI JOHN F Symbol Issuer SALISBURY BANCORP INC	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
[SAL]	(Check an applicable)			
(Last) (First) (Middle) 3. Date of Earliest Transaction _X_ Director (Month/Day/Year) (Month/Day/Year) Officer (give title below) 131 SHARON MOUNTAIN ROAD 05/17/2016 Officer (give title below)	Officer (give title Other (specify			
(Street) 4. If Amendment, Date Original 6. Individual or Joint Filed(Month/Day/Year) Applicable Line)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SHARON, CT 06069 Form filed by More Person				
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or	or Beneficiall	y Owned		
Security (Instr. 3) (Month/Day/Year) Execution Date, if any Transaction(A) or Disposed of (D) Securities Fee Beneficially (Instr. 3) any Code (Instr. 3, 4 and 5) Beneficially (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8) Owned In Following In (A) or (Instr. 3 and 4) (Instr. 3 and 4)	Form: Direct D) or ndirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock05/17/2016Code AV Amount 340 Price 29.81 (Hist) 5 and 17Common Stock05/17/2016A340A $\frac{$}{29.81}$ 1,896 $\frac{(1)}{(2)}$ D)			
Common 9,514 (3) D)			
Common 2,928 (2) (4) I Stock		Owned by spouse		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Securi (Instr.	int of 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		

er

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Othe				
PEROTTI JOHN F 131 SHARON MOUNTAIN SHARON, CT 06069	I ROAD	Х						
Signatures								
/s/ John F. Perotti	05/18/20	16						

**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).
- In accordance with the 2011 Long Term Incentive Plan of Salisbury Bancorp, Inc. ("The Company"), three hundred forty (340) shares of
 (1) the Company's common stock were granted to John F. Perotti at \$29.81 per share which represents the value of the Company's common stock at closing on the grant date.
- (2) Includes shares acquired upon reinvestment of dividends pursuant to the Salisbury Bancorp, Inc. Dividend Reinvestment and Stock Purchase Plan.
- (3) JT with spouse.
- (4) The reporting person disclaims beneficial ownership of these securities. This report should not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or any other purpose.

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.