Edgar Filing: Cozzone Robert D - Form 4

Form 4	idert D										
March 13, 2	2019										
FORM	Л 4 _{UNITED}	STATES	SECU	RITIES	AND EX	СН	ANGE C	OMMISSION		PROVAL	
		GINIL		shington					OMB Number:	3235-0287	
Check the check	nger	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									
subject Section Form 4 Form 5		SECU	Estimated average burden hours per response 0.								
obligation may cor <i>See</i> Inst 1(b).	ons ntinue. Section 17	(a) of the	Public U	Itility Ho	olding Co	mpar	•	Act of 1934, 1935 or Section)			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Cozzone Robert D			2. Issuer Name and Ticker or Trading Symbol INDEPENDENT BANK CORP [INDB]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	-	-	Transactio	,		Director	10%	Owner	
C/O INDEPENDENT BANK CORP., 288 UNION STREET			3. Date of Earliest Transaction (Month/Day/Year) 03/11/2019					XOfficer (give t below)		r (specify	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
(City)	(State)	(Zip)	Tab	ole I - Non-	-Derivativ	e Secu	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemo Execution any (Month/Da			Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) ay/Year) (Instr. 8) (A)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	OwnershipIndirectForm:BenefitDirect (D)Owner	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	03/11/2019			М	2,500	А	\$ 27.575	30,432.7509 (1)	D		
Common Stock	03/11/2019			S	2,500	D	\$ 81.6395 (2)	27,932.7509 (1)	D		

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

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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. Transacti Code (Instr. 8)	ransaction of Derivative ode Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
NQ Stock Option (Right to Buy)	\$ 27.575	03/11/2019		М		2,500	01/02/2012 <u>(3)</u>	02/10/2021	Common Stock	2,500

Reporting Owners

		Relatio		
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Cozzone Robert D C/O INDEPENDENT BANK CORP. 288 UNION STREET ROCKLAND, MA 02370			CFO	
Signatures				
/s/ Maureen Gaffney, Power of Attorne Cozzone	03/13/2019			
<u>**</u> Signature of Reporting Perso	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) Total Holdings include 2,836.4478 shares held in Filer's 401(k) account

This price represents the weighted average purchase price of stock sales that were executed at prices ranging from \$81.50 through \$81.88(2) per share. The reporting person hereby undertakes, upon request by the SEC staff, the issuer or a security holder of the issuer, to provide full information regarding the number of shares purchased at each separate price.

Granted under the Independent Bank Corp. 2005 Employee Stock Option Plan (2005 Plan). 834 shares shall first become exercisable on
 (3) 1/2/12; 833 shares shall first become on 1/02/13, and the remaining 833 shares shall first become exercisable on 1/2/14, subject to the earlier termination of employment or acceleration of vesting schedule under certain termination of employee circumstances.

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.