Edgar Filing: SLADES FERRY BANCORP - Form 5

SLADES FERRY BANCORP Form 5 February 14 FORM

Febru	ary 14, 20	05									
FC	DRM {	5				OMB AP	PROVAL				
		UNITE	D STATES	S SECURITIES AND EXCHANGE (COMMISSION	OMB Number:	3235-0362				
	Check this bo no longer subj to Section 16. Form 4 or For			Washington, D.C. 20549	Expires:	January 31, 2005					
		m Al	NNUAL ST	Estimated av	verage						
4	5 obligations may continue.			OWNERSHIP OF SECURITIES		burden hour response	s per 1.0				
See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,											
I	Form 3 Holdir			Public Utility Holding Company Act o		1					
	Reported Form 4		30(h)	of the Investment Company Act of 19	40						
	Fransactions Reported										
1	Reported										
1. Name and Address of Reporting Person <u>*</u> SULLIVAN WILLIAM J				2. Issuer Name and Ticker or Trading Symbol	Reporting Perso	on(s) to					
				SLADES FERRY BANCORP [SFBC]	(Check						
(]	Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended	X Director Officer (give t		Owner (specify				
				(Month/Day/Year) 12/31/2004	below)	below)	(speeny				
550 I	LOCUST	STREET									
(Street)				4. If Amendment, Date Original	oint/Group Reporting						
				Filed(Month/Day/Year)	(-11						
					(cneck	applicable line)					

FALL RIVER, MAÂ 02720

X Form Filed by One Reporting Person _ Form Filed by More than One Reporting Person

(City)	(State) (Zip) Tabl	e I - Non-Deri	vative Sec	curitie	es Acquir	ed, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit (A) or Di (Instr. 3, 4)	spose	d of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, par value \$0.01	10/15/2004	Â	J	193	A	\$ 19.01	43,058	D	Â
Common Stock, par value \$0.01	07/23/2004	Â	J	164	A	\$ 22.22	0	D	Â
Common Stock, par value \$0.01	01/16/2004	Â	J4	165	A	\$ 22.02	0	D	Â

Edgar Filing: SLADES FERRY BANCORP - Form 5

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. SEC 2270 (9-02)

8. D S (I

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. Transaction Code (Instr. 8)		vative rities uired or osed)) r. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 10	Â	Â	Â	Â	Â	04/10/2000	04/09/2005	Common Stock	2,000
Stock Option (Right to Buy)	\$ 9.5	Â	Â	Â	Â	Â	04/10/2001	04/09/2006	Common Stock	2,000
Stock Option (Right to Buy)	\$ 14.15	Â	Â	Â	Â	Â	04/09/2002	04/10/2007	Common Stock	2,000
Stock Option (Right to Buy)	\$ 14.59	Â	Â	Â	Â	Â	04/15/2003	04/14/2008	Common Stock	2,000
Stock Option (Right to Buy)	\$ 19.25	Â	Â	Â	Â	Â	05/11/2004	05/10/2009	Common Stock	2,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SULLIVAN WILLIAM J	ÂΧ	Â	Â	Â			

550 LOCUST STREET FALL RIVER, MAÂ 02720

Signatures

/s/ Isola A. Anctil for William J. Sullivan, by power of attorney

**Signature of Reporting Person

02/10/2005

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).

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.