SAUL CENTERS INC

Form 5

February 12, 2015

OMB APPROVAL FORM 5 **OMB**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Number: Washington, D.C. 20549 Check this box if Expires:

no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940

Form 4

Transactions Reported

1. Name and A Friedman Jo	Address of Reporting Foel Albert	Symbol	2. Issuer Name and Ticker or Trading Symbol SAUL CENTERS INC [BFS]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	(Month/I	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014				(Check all applicable) Director 10% Owner _X_ Officer (give title Other (specify			
7501 WISC AVENUE,Â	ONSIN À 15TH FLOOR	12,31,2	W1-1				below)	below) Chief Acctng O		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting			
		T fied(Mo					(check applicable line)			
BETHESDA	A, MD 20814						_X_ Form Filed by Form Filed by Person	One Reporting Pour More than One R		
(City)	(State)	(Zip) Tab	le I - Non-Deri	ivative Sec	curities	s Acqu	ired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price)	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)		
Common Shares	Â	Â	Â	Â	Â	Â	100	D	Â	
Common Shares	Â	Â	Â	Â	Â	Â	8,356.64	I (1)	401K	
D ' 1 D									GEG 2250	

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)

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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. Transaction Code (Instr. 8)	Number				7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Employee Stock Option	\$ 41.82	Â	Â	Â	Â	Â	05/13/2011(2)	05/13/2021	Common Stock	5,000
Employee Stock Option	\$ 39.29	Â	Â	Â	Â	Â	05/04/2012(2)	05/04/2022	Common Stock	5,000
Employee Stock Option	\$ 44.42	Â	Â	Â	Â	Â	05/10/2013(2)	05/10/2023	Common Stock	10,000
Employee Stock Option	\$ 47.03	Â	Â	Â	Â	Â	05/09/2014(2)	05/09/2024	Common Shares	10,000

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Friedman Joel Albert 7501 WISCONSIN AVENUE 15TH FLOOR BETHESDA, MD 20814	Â	Â	Sr. V.P./Chief Acctng Officer	Â				

Signatures

Scott V. Schneider, by Power of Attorney 02/12/2015

**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)

Reporting Owners 2

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Effective April 1, 2009, shares formerly held by the B.F. Saul Company Employees' Profit Sharing Reinvestment Trust were distributed to the individual 401(k) plan accounts of participants. The number of shares reported represents the reporting person's beneficial ownership interest in the Saul Centers stock fund of the 401(k) plan.

(2) The options vest 25% per year over four years from the date of grant.

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.