Edgar Filing: 1ST SOURCE CORP - Form 4

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Form 4										
August 01, 20 FORM Check thi if no long subject to	s box s ^{er} STATEM	4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								
Subject to Section 10 Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	6. r Filed pur ¹⁸ Section 17(SECURITIES 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							verage rs per 0.5	
(Print or Type R	Responses)									
SCHWABERO MARK D Symbol			r Name and Ticker or Trading URCE CORP [SRCE]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
PO BOX 1602 (Month/D 07/30/20 (Street) 4. If Amer Filed(Mon			-	ansaction			X Director Officer (give below)	10%) Owner er (specify	
			endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
SOUTH BE	ND, IN 46634						Person	lore than one Re	porting	
(City)	(State)	(Zip) Tab	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	07/30/2014		А	780	A	\$ 29.48	6,477	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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)	ionNumber Expirat of (Month		5. Date Exerc Expiration Da Month/Day/Y	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (I	· ·		Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SCHWABERO MARK D PO BOX 1602	Х							
SOUTH BEND, IN 46634 Signatures								
Signatures								
/s/ John B. Griffith, Attorney-in-Fact	08/01/2014							
**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).

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.