Buhr Jeffrey L Form 4 January 16, 2019

# FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

**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 30(h) of the Investment Company Act of 1940

1(b).

Common

Common

Stock

Stock

01/08/2019

(Print or Type Responses)

1. Name and Address of Reporting Person * Buhr Jeffrey L			2. Issuer Symbol	Name and	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
			1ST SO	URCE C	ORP [SRCE]	(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction		• • •			
			(Month/D	ay/Year)		Director	10%	Owner		
P.O. BOX 1602 (Street)			01/08/20	-		_X_ Officer (give title Other (specify below)  Executive Vice President				
			4. If Ame	ndment, Da	te Original	6. Individual or Joint/Group Filing(Check				
		Filed(Mon	th/Day/Year		Applicable Line) _X_ Form filed by One Reporting Person					
SOUTH BE	ND, IN 46634					Form filed by M Person	More than One Re	porting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative Securities Acq	uired, Disposed of	f, or Beneficiall	y Owned		
1.Title of Security (Month/Day/Year) 2. Transaction Date (Month/Day/Year) Execution any (Month/Day/Year)		n Date, if	3. Transaction Code (Instr. 8)	4. Securities Acquired on (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				

Code V Amount

10

A

(D)

A

Price

40.34

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

(Instr. 3 and 4)

D

Ι

50,921

4,471 (1)

By 401(k)

### Edgar Filing: Buhr Jeffrey L - Form 4

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title a		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amount		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	_	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	,				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					4, and 5)						
					4, and 3)						
								A	mount		
						D.	E	01	r		
							Expiration Date	Title Numb	umber		
								01			
				Code V	(A) (D)				hares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Buhr Jeffrey L P.O. BOX 1602 SOUTH BEND, IN 46634

**Executive Vice President** 

### **Signatures**

/s/ John B. Griffith, Attorney-in-Fact

01/16/2019

\*\*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).
- Between January 1, 2018 and December 31, 2018, Mr. Buhr acquired 135 shares of 1st Source Corporation common stock under the 401(k) plan. The information is this report is based on a plan statement dated December 31, 2018.

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.

Reporting Owners 2