Edgar Filing: BROOKLINE BANCORP INC - Form 4

| BROOKLINI Form 4 July 26, 2016 | E BANCORP INC | 2 | | | | | | | | |
|---|---|--|--|--|-----------|--|---|--|---|--|
| FORM | Л | | | | | | | | PPROVAL | |
| | UNITED S | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | OMB Number: | 3235-0287 | |
| Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin See Instruc | Filed purson Filed purson Section 17(a) | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 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 | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | | | |
| 1(b). (Print or Type R | action (action) | | | | | | | | | |
| (I mit of Type K | esponses) | | | | | | | | | |
| 1. Name and Ac WILDE PET | ldress of Reporting Po ÈR O | Symbol | - | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | BROOKLINE BANCORP INC [BRKL] | | | | (Check all applicable) | | | |
| (Last) | (Month/Da | 3. Date of Earliest Transaction (Month/Day/Year) 07/25/2016 | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | | |
| | | | If Amendment, Date Original led(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| BOSTON, M | IA 02117 | | | | | | Form filed by M Person | More than One Ro | eporting | |
| (City) | (State) (Z | Zip) Table | e I - Non-Do | erivative S | Securi | ties Ac | quired, Disposed o | of, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | (Month/Day/Year) Execution | | 3. Transactic Code | TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) | | | Securities Deneficially Owned Deneficially Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | Code V | | or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock | 07/25/2016 | | А | 3,000 (1) | А | \$0 | 147,065 <u>(2)</u> | D | | |
| Common Stock | | | | | | | 10,200 | Ι | By IRA | |

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) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Tit Amou Unde Secur (Instr | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|---|--|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| WILDE PETER O 131 CLARENDON STREET BOSTON, MA 02117 | Х | | | | | | | |
| Signatures | | | | | | | | |
| Peter O. Wilde, by Marissa S. I POA | 07/26/2016 | | | | | | | |
| **Signature of Reporting Person | | D | ate | | | | | |
| 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) Restricted stock shares granted pursuant to the Brookline Bancorp, Inc. 2014 Equity Incentive Plan. The shares vest one year from the date of grant.

(2) Includes shares of restricted stock granted pursuant to the Brookline Bancorp, Inc. 2014 Equity Incentive Plan.

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.