## Edgar Filing: LORENTSON JEFFREY B - Form 4

	N JEFFREY B									
Form 4	17									
August 02, 20								OMB AF	PROVAL	
FORM	<b>4</b> UNITED S		URITIES A Vashington			NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). StateMent of Changes in Beneficial of SECURITIES Filed pursuant to Section 16(a) of the Securities Excha Section 17(a) of the Public Utility Holding Company Act 30(h) of the Investment Company Act of					xchang y Act of	Estimated average burden hours per response 0 ge Act of 1934, of 1935 or Section				
(Print or Type R	esponses)									
LORENTSON JEFFREY B Symbol			ol T MERCH	r Name <b>and</b> Ticker or Trading MERCHANTS CORP			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 200 E JACK	(First) (Middle) 3. Date of (Month/D ACKSON STREET 07/31/20			-			Director 10% Owner X Officer (give titleX Other (specify below) below) Chief Risk Officer / Senior Vice President			
			.mendment, Da Month/Day/Yea	endment, Date Original nth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MUNCIE, IN	N 47305						_X_Form filed by C Form filed by M Person			
(City)	(State) (	Zip) T	able I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	Code ar) (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	4 and (A) or	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)	Indirect Beneficial	
Common Stock	07/31/2017		A	700	A	\$ 40.44	14,297.023 (1)	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)

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. Transact Code (Instr. 8)	5. tionNumber of ) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	/ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>			Relationships			
	Director	10% Owner	Officer	Other		
LORENTSON JEFFREY B 200 E JACKSON STREET MUNCIE, IN 47305			Chief Risk Officer	Senior Vice President		
Signatures						
Addison Nicoll (Confirming Staton File)	08/02					
**Signature of Reporting Person		Da	te			

## **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) Includes Restricted Stock Awards totaling 2,768.260 shares

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.