Edgar Filing: SULLIVAN MATTHEW J - Form 4

SULLIVAN M Form 4	ATTHEW J										
March 25, 2019)										
										PPROVAL	
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruction 1(b).	STATEN Filed put e. Section 170	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 30(h) of the Investment Company Act of 1940								Expires: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type Resp	ponses)										
1. Name and Address of Reporting Person <u>*</u> SULLIVAN MATTHEW J			2. Issuer Name and Ticker or Trading Symbol MARLIN BUSINESS SERVICES CORP [MRLN]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O MARLIN BUSINESS SERVICES CORP., 300 FELLOWSHIP ROAD			3. Date of Earliest Transaction (Month/Day/Year) 09/12/2018					X_ Director 10% Owner Officer (give title Other (specify below) below)			
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) MOUNT LAUREL, NJ 08054				e Original		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table	I - Non-Da	rivativa S	ocurities			of, or Beneficia	lly Owned	
		Yransaction Date 2A. Dee onth/Day/Year) Executi any (Month/		3.	4. Securities ionAcquired (A) or Disposed of (D)			Amount of curities neficially vned llowing ported ansaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common stock				Code V	Amount	(D) Pr	rice	o,898 (1)	D		
Common Stock							23	4,483 <u>(2)</u>	I	See footnote (3)	

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own 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			
SULLIVAN MATTHEW J C/O MARLIN BUSINESS SERVICES CO 300 FELLOWSHIP ROAD MOUNT LAUREL, NJ 08054	ORP.	Х					
Signatures							
/s/ Edward R. Dietz Attorney-in-Fact	03/25/	/2019					
<u>**</u> Signature of Reporting Person	Dat	e					

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 shares of restricted stock where, as of the date of this filing, the restrictions have not yet lapsed.
- (2) Previously reported indirect ownership of shares has been reduced by 204,982 shares distributed pro rata to limited partners on September 12, 2018.

The 234,483 reported shares are owned by Peachtree CIP, L.P., whose general partner is Peachtree Equity Management, LLC (the "General Partner"). The reporting person is the Managing Director of the General Partner and could be deemed to be an indirect holder of

(3) the reported shares. The reporting person disclaims beneficial ownership of these shares and this report shall not be deemed an admission that he is the beneficial owner or these shares for purposes of Section 16 or for any other purpose, except to the extent of his pecuniary interest therein.

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.