Edgar Filing: PROVIDENCE SERVICE CORP - Form 4

PROVIDENCE Form 4 March 15, 2017	E SERVICE CO 7	RP								
				ITIES AND EXCHANGE COMMISSION hington, D.C. 20549					PPROVAL 3235-0287	
								irs per		
(Print or Type Res	sponses)									
Wright Frank J _{Syn} PR			2. Issuer Name and Ticker or Trading Symbol PROVIDENCE SERVICE CORP [PRSC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 700 CANAL S FLOOR	e of Earliest Transaction h/Day/Year) 8/2017				X_ Director 10% Owner Officer (give title Other (specify below) below)					
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 					
STAMFORD,	, CT 06902						Form filed by M Person	More than One R	eporting	
(City)	(State) (Z	Cip) Tal	ole I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
	2. Transaction Date (Month/Day/Year)		Code	Disposed (Instr. 3,	l (A) o l 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	03/03/2017		А	3,097	А	\$0	5,031	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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addro	265	Relationships							
Reporting Owner Funct, Fruit	Director	10% Owner	Officer	Other					
Wright Frank J 700 CANAL STREET THIRD FLOOR STAMFORD, CT 06902	Х								
Signatures									
/s/ Frank J. Wrigjt	03/15/2017								
<u>**</u> 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.