Edgar Filing: SALISBURY BANCORP INC - Form 5

SALISBURY BANCORP INC Form 5 February 06, 2 **FORM**

Form 5										
February 06,	2014									
FORM	15						OMB A	PPROVAL		
	UNITED	STATES			DEXCHANGE	COMMISSION	OMB Number:	3235-03	62	
Check this no longer s	subject		Was	Washington, D.C. 20549				January 3 20		
to Section 16. Form 4 or Form 5 obligations may continue. ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average burden hours per response		.0			
See Instruct 1(b).	ction	rsuant to	Section 10	6(a) of the S	ecurities Exchang	ge Act of 1934,				
Form 3 Ho	•				g Company Act o	-	n			
Reported Form 4 Transactio Reported					ompany Act of 19					
1. Name and Address of Reporting Person <u>*</u> Farrell David B			2. Issuer Name and Ticker or Trading Symbol SALISBURY BANCORP INC			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			[SAL]			(chie	ii uii uppiivuoii	-)		
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2013			X_ Director Officer (give below)		o Owner er (specify		
210 ROTE I	HILL ROAD									
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Reporting				
The second se				(wondinibay) (car)			(check applicable line)			
SHEEFIFI I	D, MA 0125'	7								
SHETTLET),A WAA 0125	I				_X_ Form Filed by Form Filed by M Person	One Reporting P More than One R			
(City)	(State)	(Zip)	Table	e I - Non-Deri	vative Securities Ac	quired, Disposed of	, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year) Execution any	emed on Date, if 'Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	Ē	

	()	17 I able	e I - Non-Deri	vauve Sec	uritie	s Acqui	rea, Disposed o	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	Â	Â	Â	Â	Â	Â	239.2463	D (1) (2)	Â

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

Persons who respond to the collection of information SEC 2270 contained in this form are not required to respond unless (9-02)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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. of D Se B O E I S Fi (I
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Farrell David B 210 ROTE HILL ROAD SHEFFIELD, MA 01257	ÂX	Â	Â	Â			
Signatures							

/s/ David B. Farrell	01/31/2014				
<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).
- (1) Self
- (2) Includes shares acquired upon reinvestment of dividends pursuant to the Salisbury Bancorp, Inc. Dividend Reinvestment and Stock Purchase Plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.