SAUL CENTERS INC

Form 4 May 19, 2014

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Person

January 31, Expires: 2005 Estimated average

Form 4 or Form 5 obligations may continue.

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

burden hours per 0.5 response...

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * COLLICH JOHN F			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
			SAUL CENTERS INC [BFS]	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction			
			(Month/Day/Year)	Director 10% Owner		
7501 WISCONSIN AVENUE, 15TH FLOOR			05/16/2014	_X_ Officer (give title Other (specify below) Sr. VP-Acquisitions & Dev.		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting		
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(City)	(State)	(Zip) Table	e I - Non-D	Derivative	Securi	ties Acq	uired, Disposed o	f, 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. Transactic Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	sposed 4 and 5 (A) or	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 Shares							1,623.038	I	Wife
Series A Preferred Stock							662	D	
Series A Preferred Stock							2,467.466	I	Wife
Series C Preferred Stock							1,000	D	

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Series C								
Preferred						3,000	I	Wife
Stock								
Common Shares	05/16/2014	S	700	D	\$ 46.75	21,152.009	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.

SEC 1474

(9-02)

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option	\$ 33.22					05/06/2006(1)	05/06/2015	Common Stock	3,000	
Employee Stock Option	\$ 54.17					04/27/2008(1)	04/27/2017	Common Stock	15,000	
Employee Stock Option	\$ 41.82					05/13/2011(1)	05/13/2021	Common Stock	15,000	
Employee Stock Option	\$ 39.29					05/04/2012(1)	05/04/2022	Common Stock	15,000	
Employee Stock Option	\$ 44.42					05/10/2013(1)	05/10/2023	Common Stock	20,000	
Employee Stock Option	\$ 47.03					05/09/2014	05/09/2024	Common Shares	20,000	

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Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

COLLICH JOHN F 7501 WISCONSIN AVENUE 15TH FLOOR

BETHESDA, MD 20814

Sr. VP-Acquisitions & Dev.

Signatures

Scott V. Schneider, by Power of Attorney

05/19/2014

**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) The options vest 25% per year over four years from the date of grant.

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.

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