### CARISTIA KATHERINE H

Form 4 January 29, 2018

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

5. Relationship of Reporting Person(s) to

3235-0287

0.5

Expires: January 31, 2005

**OMB APPROVAL** 

Estimated average burden hours per

burden hours per response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

Form 5
obligations
may continue.

See Instruction

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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

CARISTIA KATHERINE H			Symbol SUSSEX BANCORP [SBBX]					Issuer						
(Last) (First) (Middle)  C/O SUSSEX BANCORP, 399  ROUTE 23			3. Date of Earliest Transaction (Month/Day/Year) 01/25/2018					(Check all applicable)  _X_ Director 10% Owner Officer (give title below) Other (specify 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						
FRANKLIN, NJ 07416  (City) (State) (Zip)										Form filed by More than One Reporting Person  cquired, Disposed of, or Beneficially Owned				
1.Title of Security (Month/Day/Year) Execution E any (Month/Day		med on Date, if	ed 3. 4. Securities Date, if Transaction(A) or Dispos Code (D)			quired of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	mount of 6. prities Ownership eficially Form: Direct ned (D) or owing Indirect (I) orted (Instr. 4) nsaction(s)						
	Common Stock	01/25/2018			Code V	Amount 99.59 (1)	(D)	Price \$ 0	6,239.19	I	by Dir. Deferred Comp. Agreement			
	Common Stock	01/25/2018			A	122.73 (2)	A	\$0	22,875.03	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)

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
						Date	Expiration		Or Number		
						Exercisable	Date		Number		
				C + V	(A) (D)				of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
CARISTIA KATHERINE H C/O SUSSEX BANCORP	v						

**Signatures** 

FRANKLIN, NJ 07416

399 ROUTE 23

Linda Kuipers, 01/29/2018 Attorney-in-Fact

\*\*Signature of Reporting Person

## **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).
- These shares represent stock purchased pursuant to the Company's Amended and Restated Director Deferred Compensation **(1)** Agreement due to the deferral of director's fees earned by this reporting person.
- **(2)** These share were acquired under the Dividend Reinvestment Plan at American Stock Transfer and Trust Company.

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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