Edgar Filing: HORIZON BANCORP /IN/ - Form 5

HORIZON BANCORP /IN/
Form 5
February 10, 2014
FORM 5

February 10	, 2014							
FORM	15						OMB AF	PROVAL
Check the no longer	UNITED is box if	STATES		RITIES AN shington, D	OMB Number: Expires:	3235-0362 January 31, 2005		
to Section Form 4 o 5 obligati may cont <i>See</i> Instru 1(b). Form 3 H Reported Form 4 Transacti Reported	r Form ANN ions inue. iction Filed put toldings Section 170	rsuant to s (a) of the	OWNE Section 1 Public U	RSHIP OF S 6(a) of the S tility Holdin	IANGES IN BEN SECURITIES Securities Exchang og Company Act of company Act of 194	e Act of 1934, 1935 or Sectior	Estimated a burden hour response	verage
1. Name and Address of Reporting Person <u>*</u> DWORKIN JAMES B			2. Issuer Name and Ticker or Trading Symbol HORIZON BANCORP /IN/ [HBNC]			5. Relationship of Reporting Person(s) to Issuer		
(Last)	(Last) (First) (Middle)			ent for Issuer's Day/Year) 014	Fiscal Year Ended	(Check X_ Director Officer (give t) Owner r (specify
1458 SPYC	GLASS CIRCLE		02/10/2	014		below)	below)	
	(Street)			endment, Date hth/Day/Year)	Original	6. Individual or Jo		orting
						(check	applicable line)	
CHESTER	TON, IN 4630)4				_X_ Form Filed by C Form Filed by M Person		
(City)	(State)	(Zip)	Tabl	e I - Non-Deri	ivative Securities Acq	uired, Disposed of,	, or Beneficiall	y Owned
1.Title of Security	2. Transaction Dat (Month/Day/Year)			3. Transaction	4. Securities Acquired (A) or		6. Ownership Form: Direct	

(Month/Day/Year)	Execution Date, if	Transaction	Acquired	l (A) o	r	Securities	Form: Direct	Indirect
	any	Code	Disposed	l of (D)	Beneficially	(D) or	Beneficial
	(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)		Owned at end	Indirect (I)	Ownership	
				(A)		of Issuer's	(Instr. 4)	(Instr. 4)
			Amount	(D)	Price	(Instr. 3 and 4)		
Â	Â	Â	Â	Â	Â	11,270 <u>(1)</u>	D	Â
	`` ` `	any (Month/Day/Year)	any Code (Month/Day/Year) (Instr. 8)	any Code Disposed (Month/Day/Year) (Instr. 8) (Instr. 3, Amount	any Code Disposed of (D (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and (A) or Amount (D)	any Code Disposed of (D) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or Amount (D) Price	any Code Disposed of (D) Beneficially (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end (A) of Issuer's Fiscal Year (Instr. 3 and 4)	any Code Disposed of (D) Beneficially (D) or (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end Indirect (I) (A) of Issuer's (Instr. 4) Fiscal Year or Amount (D) Price (Instr. 3 and 4)

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 2270 (9-02)

 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 Exercisable and	7. Title and	8. Price of	9.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration Date	Amount of	Derivative	of

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Security (Instr. 3)	or Exercise Price of Derivative Security	any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		Underlying Securities (Instr. 3 and 4)		(Instr. 5)	D Se D Eı Is Fi (It
_				(A) (D)	Date Exercisable	Expiration Date	(] (Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
1 0	Director	10% Owner	Officer	Other		
DWORKIN JAMES B 1458 SPYGLASS CIRCLE CHESTERTON, IN 46304	ÂX	Â	Â	Â		
Signatures						
/s/ Mark E Secor, Attorney-in-Fact	0	2/10/2014				
**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) Includes shares purchased with reinvested dividends.

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.