TriState Capital Holdings, Inc.

Form 4

Common

Stock

December 02, 2015

FOR	FORM 4 LINITED STATES SECUDITIES AND EXCHANGE COMMISSION						OMB APPROVAL			
	UNITED	O STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							3235-0287	
Check if no lo	this box		Expires:	es: January 31, 2005						
subject Section Form 4	to STATE	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							d average ours per	
Form 5 obligate may co See Ins 1(b).	ions Section 17	(a) of the Pub		olding C	ompa	any Act of	1935 or Section	on		
(Print or Type	e Responses)									
1. Name and Address of Reporting Person * Dewhurst E.H.			Issuer Name anbol State Capita				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle) 3. Date of Earliest Transaction					(Cne	neck all applicable)		
ONE OXFORD CENTRE, 301 GRANT STREET, SUITE 2700			(Month/Day/Year) 12/01/2015				X Director 10% Owner Officer (give title below) Other (specify below)			
	(Street)	4. I	f Amendment,	Date Origi	inal		6. Individual or J	oint/Group F	iling(Check	
PITTSBU	RGH, PA 15219	File	ed(Month/Day/Y	ear)			Applicable Line) _X_ Form filed by Form filed by l Person			
(City)	(State)	(Zip)	Table I - Nor	1-Derivati	ve Sec	curities Acq	uired, Disposed o	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Ye	Date, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)			(D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount		Price	(Instr. 3 and 4)		DV E 44 GOV	
Common Stock	12/01/2015		S <u>(1)</u>	6,900	D	\$ 13.1866 (2)	0	I	BY FALCON SEABOARD INVESTMENT COMPANY, L.P. (3)	

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

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4,000

D

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number.

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	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Number Expiration Date		Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security		Acquired								Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration Date		or Namel		
						Exercisable			Title Number		
				C 1 W	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships

Dewhurst E.H.
ONE OXFORD CENTRE
301 GRANT STREET, SUITE 2700
PITTSBURGH, PA 15219

X

Signatures

/s/ Keevican Weiss Bauerle & Hirsch LLC by David J. Hirsch, Attorney-in-Fact

12/01/2015

**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 sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 9, 2015.
- The price reported in Column 4 is the average price. The shares were sold in multiple transactions at prices ranging from \$13.12 to \$13.30, inclusive. The Reporting Person undertakes to provide to any security holder of TriState Capital Holdings, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- (3) The Reporting Person is Vice President-Finance, Treasurer and Authorized Representative of this entity.

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.

Reporting Owners 2