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William Nathan Salin Family Irrevocable Trust #1 Form 3

April 03, 2019

FORM 3

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

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement HORIZON BANCORP INC /IN/ [HBNC] A William Nathan Salin Family (Month/Day/Year) 03/26/2019 Irrevocable Trust #1 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 10587 COPPERGATE DRIVE (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) Director __X__ 10% Owner Form filed by One Reporting Officer Other Person (give title below) (specify below) CARMEL, INÂ 46032 _X_ Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership (Instr. 4) Ownership (Instr. 5) (Instr. 4) Form: Direct (D) or Indirect (I) (Instr. 5) Â Common Stock, no par value 4,877,130 (1) (2) D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title	Security	Direct (D)	

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships			
	Director	10% Owner	Officer	Other	
William Nathan Salin Family Irrevocable Trust #1 10587 COPPERGATE DRIVE CARMEL, IN 46032	Â	ÂX	Â	Â	
Salin Margaret Jane 10587 COPPERGATE DRIVE CARMEL, IN 46032	Â	ÂX	Â	Â	

Signatures

WILLIAM NATHAN SALIN Trustee	FAMILY IRREVOCABLE TRUST #1 /s/ Margaret Jane Salin,	04/03/2019
	**Signature of Reporting Person	Date
/s/ Margaret Jane Salin		04/03/2019
	**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).
 - Received pursuant to the Merger Agreement between Horizon Bancorp, Inc. ("Horizon") and Salin Bancshares, Inc. ("SBI"), dated October 29, 2018, as amended by that First Amendment to Merger Agreement, dated December 18, 2018 (the "Merger Agreement"),
- (1) pursuant to which SBI was merged with and into Horizon on March 26, 2019 (the "Effective Time"). Pursuant to the Merger Agreement, as of the Effective Time, each issued and outstanding share of SBI common stock converted into the right to receive (i) 23,907.5 shares of Horizon common stock and cash in lieu of fractional shares, and (ii) \$87,417.17 in cash.
- Margaret Jane Salin serves as the sole trustee of the William Nathan Salin Family Irrevocable Trust #1 (the "Trust") and, in such capacity, has sole voting and dispositive power. Ms. Salin disclaims beneficial ownership of these shares except to the extent of her pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of the reported shares for purposes of Section 16 or for any other purpose.

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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