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STEWARDSHIP FINANCIAL CORP

Form 4

December 30, 2016

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

OMB

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 Number: January 31, Expires:

2005

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations

SECURITIES

Estimated average burden hours per response... 0.5

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

(State)

2. Issuer Name and Ticker or Trading

Issuer

below)

Yeaton Howard

(Last)

(City)

Symbol STEWARDSHIP FINANCIAL

(Check all applicable)

5. Relationship of Reporting Person(s) to

CORP [SSFN] (Middle)

(Zip)

3. Date of Earliest Transaction

_X__ Director 10% Owner Other (specify Officer (give title

630 GODWIN AVENUE

(Month/Day/Year) 02/16/2016

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

(Street) Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Table I. Non Derivative Securities Acquired Disposed of an Reposicially Ou

MIDLAND PARK, NJ 07432

| (,) | (2) | Table | e 1 - Noi | n-De | erivative S | securi | ties Acq | juirea, Disposea o | i, or Beneficial | ly Owned |
|--------------------------------------|--------------------------------------|------------------------|----------------------------|------|-------------------------|--------|--|--|----------------------------------|------------------------|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution Date, if any | Date, if Transacti Code | | | ispose | d of | 5. Amount of Securities Beneficially | 6. Ownership Form: Direct (D) or | Indirect Beneficial |
| | | (Month/Day/Year) | (Instr. | 8) | (A) (Instr. 3, 4 and 5) | | Owned Following Reported Transaction(s) | Indirect (I) (Instr. 4) | Ownership (Instr. 4) | |
| | | | Code | V | Amount | | Price | (Instr. 3 and 4) | | |
| Common A | 02/16/2016 | | J <u>(1)</u> | V | 44.35 | A | \$ 5.61 | 12,474.8 | D | |
| Common A | 05/16/2016 | | J <u>(1)</u> | V | 67.13 | A | \$ 5.58 | 12,541.92 | D | |
| Common A | 08/15/2016 | | <u>J(1)</u> | V | 55.55 | A | \$ 6.78 | 12,597.47 | D | |
| Common A | 11/15/2016 | | J <u>(1)</u> | V | 49.24 | A | \$ 7.68 | 12,646.71 | D | |

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

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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 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) | . | ate | 7. Title at Amount of Underlyin Securities (Instr. 3 a | of ng s | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|---------------|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | or Title Nu of | umber | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Yeaton Howard 630 GODWIN AVENUE X MIDLAND PARK, NJ 07432

Signatures

/s/ Diane Kerner, Power of Attorney for Howard Yeaton 12/30/2016

**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) Dividend Reinvestment Plan purchase as a result of cash dividend

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