Edgar Filing: SERVOTRONICS INC /DE/ - Form 4

SERVOTRO	NICS INC /DE/	/										
Form 4												
November 23	3, 2015											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check thi				U .					Expires:	January 31,		
if no long subject to	NIA IHI	MENT O	F CHAN	GES IN H	BENEFI	CIA	LOW	NERSHIP OF		2005		
Section 10				SECURITIES					Estimated average burden hours per			
Form 4 or									response 0.5			
Form 5	Filed pu	rsuant to	Section 16	6(a) of the	Securiti	ies Ez	xchang	ge Act of 1934,				
obligation may conti <i>See</i> Instru 1(b).	nue. Section 17		Public Ut of the Inv	•	•	- ·		of 1935 or Section 40	on			
(Print or Type R	esponses)											
1. Name and Address of Reporting Person _2. IssJaroslawsky Cari LSymbol				ssuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
								Issuer				
			SERVO	SERVOTRONICS INC /DE/ [SVT]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(enc				
			(Month/D	ay/Year)				Director		6 Owner		
1110 MAPLE STREET, PO BOX 11/23/20				23/2015				XOfficer (give titleOther (specify below)				
300								· · · · · · · · · · · · · · · · · · ·	Financial Offic	cer		
	(Street)		4. If Ame	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
		th/Day/Year)	-			Applicable Line)						
								X Form filed by				
ELMA, NY	14059							Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Da	ate 2A. Dee	emed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year	 Executi any 	on Date, if		onAcquired (A) or			Securities		Indirect		
(Instr. 3)		CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
		(month	(Duy) I cui)	(11301.0)	(1150.5,	i unu	5)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D)	Price	(IIISU: 5 and 4)				
Common	01/01/2015			М	1,000	D	\$	16,205 <u>(1)</u>	D			
Stock					,		4.7	-, <u></u>				
Common Stock								2,378.1798 <u>(2)</u>	Ι	By ESOT		

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. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Options (Right to Buy)	\$ 4.7	11/23/2015		М	1,000	(3)	12/29/2015	Common Stock	1,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Jaroslawsky Cari L 1110 MAPLE STREET, PO BOX 300 ELMA, NY 14059			Chief Financial Officer				
Signatures							
Cari L.							

Jaroslawsky 11/23/2015 <u>**</u>Signature of Date 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).
- (1) As of the date hereof, the Reporting Person's direct beneficial ownership includes 9,000 restricted shares granted under the Company's 2012 Long-Term Incentive Plan that have not yet vested.
- (2) Includes an additional 594.3398 shares allocated to the reporting person pursuant to the Company Employee Stock Ownership Plan since the last required Form 4.
- (3) All of the options are currently exercisable.

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.