Edgar Filing: CHITTENDEN KEVIN - Form 4

CHITTENDEN KEVIN

Form 4											
FORM 4 UNITED STATES SECURITIES AN									OMB APPROVAL		
	UNITED	STATES		ATTIES A			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer				GES IN BENEFICIAL OWNI SECURITIES				NERSHIP OF	Expires: Estimated a burden hour response		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 17(a) of the l	Public Ut	· · /	ling Con	npany	Act of	e Act of 1934, 1935 or Sectior 0			
(Print or Type R	Responses)										
1. Name and Address of Reporting Person * CHITTENDEN KEVIN2. Issuer Symbol				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			VALLE [VLY]	EY NATIONAL BANCORP				(Check all applicable)			
(Last) 1455 VALL		Middle)	3. Date of (Month/D) 11/28/20	-	ansaction			Director X_Officer (give below) EVP, Chie		Owner er (specify fficer	
			nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
WAYNE, N	J 07470							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactio Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	11/28/2018			Code V F	Amount 800	or (D) D	Price \$ 10.34	(Instr. 3 and 4)	D		

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.

 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)	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Amor Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
		Code N		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addr	ess	Relationships						
	Director	10% Owner	Officer	Other				
CHITTENDEN KEVIN 1455 VALLEY ROAD WAYNE, NJ 07470			EVP, Chief Res. Lend. Officer					
Signatures								
/s/ Kevin Chittenden	11/28/2018							

<u>**</u>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).

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.