TriState Capital Holdings, Inc.

Form 4

Common

Stock

08/11/2014

August 11, 2014

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STATEM Filed pur	IENT OF suant to S a) of the F	Was CHAN ection 1 Public U	shington NGES IN SECUI	BENEF RITIES The Security ding Co.	0549 FICIA ities E mpany	L OW! xchange Act of	NERSHIP OF e Act of 1934, 1935 or Section	OMB Number: Expires: Estimated burden he response	d average ours per	0287
(Print or Type Respon	nses)										
1. Name and Address GETZ JAMES F		Person *	Symbol	er Name an e e Capital				5. Relationship of Issuer			
(Last) (I ONE OXFORD (GRANT STREET	CENTRE, 3		3. Date of	of Earliest T Day/Year)	_			_X_ Director _X_ Officer (give below) CHAIRMAN,	e title O	0% Owner ther (specify)
PITTSBURGH, I	PA 15219			endment, D onth/Day/Yea	_	al		6. Individual or Jo Applicable Line) _X_ Form filed by Form filed by N Person	One Reporting	Person	
(City) (S	State)	(Zip)	Tab	le I - Non-l	Derivative	e Securi	ities Acq	uired, Disposed o	f, or Benefic	ially Owned	d
	nsaction Date h/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	(Instr. 3, 4	sposed o	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										By Barch Capital,	•

\$

(1)

7,500 A

9.4103 180,618

Ι

Common Stock	490,209	D (3)
Common Stock	44,252	D (4)

P

FBO James

Individual Retirement Account $\underline{^{(2)}}$

F. Getz

Common Stock 287,173 I By Getz Enterprises, L.P. $\stackrel{(5)}{}$

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Keiauonsnips							
	Director	10% Owner	Officer	Other				
GETZ JAMES F ONE OXFORD CENTRE 301 GRANT STREET, SUITE 2700 PITTSBURGH PA 15219	X		CHAIRMAN, PRESIDENT AND CEO					

Signatures

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

08/11/2014

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

**Signature of Reporting Person

- ** 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 price reported in Column 4 is the average price. The shares were purchased in multiple transactions at prices ranging from \$9.31 to \$9.54, 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

Reporting Owners 2

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within the range set forth in this footnote.

- (2) The Reporting Person is the beneficiary of this account.
- (3) Owned by Mr. Getz individually
- (4) Shares held jointly of record by Mr. Getz and his spouse.
- (5) The Reporting Person is the general partner of this entity, which owns a total of 284,173 shares of the Issuers' common stock.

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.