## Edgar Filing: ENTERPRISE FINANCIAL SERVICES CORP - Form 4

ENTERPRIS Form 4 May 06, 201	SE FINANCIAL S	SERVICES C	CORP								
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB Number:	3235-0287		
Check the		er STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 5. SECURITIES								January 31,	
if no long subject to Section 1 Form 4 o	6. r									Expires: 200 Estimated average burden hours per response 0.	
Form 5 obligations may continue.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 19401(b).30(h) of the Investment Company Act of 1940											
(Print or Type I	Responses)										
GUEST ROBERT E JR Symbol ENTER				er Name and Ticker or Trading RPRISE FINANCIAL				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (N	SERVICES CORP [EFSC]         "irst)       (Middle)         3. Date of Earliest Transaction				X Director	10%	Owner			
			onth/Day/Ye	Day/Year)				Delow) Officer (give title below) Other (specify below)			
				endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
		( <b>7</b> :n)						Person			
(City)		(Zip)		lon-D			_	uired, Disposed of		-	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any (Month/Day/Y	Code Year) (Inst	e	4. Securit n(A) or Di (Instr. 3, Amount	spose	d 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)		
Common Stock	05/05/2015		S <u>(1)</u>	)	4,000	D	\$ 20.75	108,177	D (2)		
Common Stock								2,470	D		
Common Stock								32,885	I	Children Trust	
Common Stock								8,220	Ι	Spouse Ira	

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	-				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	Title	0ľ Numbor		
						Exercisable	Date	Title	Number		
				C.J. V	(A) (D)				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
GUEST ROBERT E JR 150 N. MERAMEC ST. LOUIS, MO 63105	Х						
Signatures							
/s/ Robert E. 0: Guest 0:	5/06/2015						
<pre>**Signature of Reporting Person</pre>	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) This transaction is pursuant to a 10b5-1 plan.
- (2) These shares are held jointly with spouse.

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.