Edgar Filing: COHEN BETSY Z - Form 4

COHEN BE Form 4 October 29, FORN Check th if no lon subject t	2009 A 4 UNITED		S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERSHIP OF							OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average		
Section 16. SECURITIES Distincted uver Form 4 or Form 5 burden hours Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section see Instruction 30(h) of the Investment Company Act of 1940 1(b). 1(b).												
(Print or Type	Responses)											
COHEN BETSY Z Syml				r Name and p, Inc. [T]		Tradiı	ıg	5. Relationship of Reporting Person(s) to Issuer				
(Last)					ransaction			(Ch	(Check all applicable)			
				Day/Year) 2009				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chief Executive Officer				
Filed(Mo				Amendment, Date Original (Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
	LPHIA, PA 19103							Person		1 0		
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Ao	equired, Disposed	of, or Benefic	cially Owned		
1.Title of Security (Instr. 3)		nsaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securiti n(A) or Dis (D) (Instr. 3, 4 Amount	posed	of	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)		
Common Stock	10/28/2009			Р	10,000	А	<u>(1)</u>	45,000	Ι	By Spouse		
Common Stock	10/28/2009			Р	15,000	A	<u>(1)</u>	87,300	Ι	By Spouse IRA		
Common Stock								497,004	I	By Soloman Investment Partnership, L.P. (2)		
Common Stock								156,934	D			

Edgar Filing: COHEN BETSY Z - Form 4

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
COHEN BETSY Z C/O THE BANCORP, INC. 1818 MARKET STREET PHILADELPHIA, PA 19103	Х		Chief Executive Officer					
Signatures								

Martin F. Egan, Attorney-in-fact 10/29/2009

**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) On October 28, 2009, the reporting person's spouse purchased, in multiple transactions, 25,000 shares of common stock of the issuer at prices ranging from \$5.19 to \$5.39.
- (2) The reporting person and her spouse are the sole shareholders, officers and directors of the corporate general partner of Solomon Investment Partnership, L.P., a limited partnership, and are the sole limited partners of this partnership.

Remarks:

Table I Column 5 does not include common shares of the issuer held by (i) Resource America, Inc., the Chairman of the Board

Edgar Filing: COHEN BETSY Z - Form 4

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.