

UNIVEST CORP OF PENNSYLVANIA
 Form 5
 January 13, 2017

FORM 5

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
 Form 3 Holdings Reported Form 4 Transactions Reported

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 1940

1. Name and Address of Reporting Person *
 MOYER K LEON

2. Issuer Name and Ticker or Trading Symbol
 UNIVEST CORP OF PENNSYLVANIA [UVSP]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)
 12/31/2016

Director 10% Owner
 Officer (give title below) Other (specify below)

P. O. BOX 64356
 (Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting (check applicable line)

SOUDERTON, PA 18964

Form Filed by One Reporting Person
 Form Filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or (D) Amount Price	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
Common	12/16/2016	^	G	125 D \$ 30.6	80,125.0904 (1) (2)	D	^
Common	^	^	^	^ ^ ^	5,905	I	Mother
Common	^	^	^	^ ^ ^	1,068	I	Spouse

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 2270 (9-02)

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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. Transaction Code (Instr. 8)	5. Number of 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 Security (Instr. 3 and 4)	
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Non-Qualified Stock Options (Right to Buy)	\$ 16.88	Â	Â	Â	Â Â	01/31/2015	01/31/2023	Common	1,5
Incentive Stock Options (Right to Buy)	\$ 17.235	Â	Â	Â	Â Â	01/31/2013	01/31/2021	Common	6,4
Incentive Stock Options (Right to Buy)	\$ 18.78	Â	Â	Â	Â Â	01/31/2016	01/31/2024	Common	6,0
Incentive Stock Options (Right to Buy)	\$ 14.8	Â	Â	Â	Â Â	01/31/2014	01/31/2022	Common	6,9
Non-Qualified Stock Options (Right to Buy)	\$ 17.235	Â	Â	Â	Â Â	01/31/2013	01/31/2021	Common	58
Incentive Stock Options (Right to Buy)	\$ 16.88	Â	Â	Â	Â Â	01/31/2015	01/31/2023	Common	5,4
Non-Qualified Stock Options (Right to Buy)	\$ 14.8	Â	Â	Â	Â Â	01/31/2014	01/31/2022	Common	14
Non-Qualified Stock Options (Right to Buy)	\$ 18.78	Â	Â	Â	Â Â	01/31/2016	01/31/2024	Common	94

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

MOYER K LEON
P. O. BOX 64356
SOUDERTON, PA 18964

^ X ^ ^ ^

Signatures

Megan D. 01/13/2017
Santana

__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) DOES INCLUDE 12,100 RESTRICTED SHARES SUBJECT TO VESTING.
 - (2) DOES INCLUDE 19,153,2290 SHARES ACQUIRED ON OR AFTER AUGUST 15, 1996 THROUGH THE DIVIDEND REINVESTMENT PLAN AND EMPLOYEE STOCK PURCHASE PLAN.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.