Edgar Filing: SUMAS JOHN - Form 4

SUMAS JOH Form 4											
December 07,											
FORM	4 UNITED	статр	SECUDI	TTES AN	ID EV	TT A N		MMISSION	OMB APPROVAL		
Washi					TIES AND EXCHANGE COMMISSION nington, D.C. 20549					3235-0287	
Check this box if no longer									Expires: January		
subject to STATEMENT OF CHAN Section 16.				GES IN BENEFICIAL OWNERSHIP (SECURITIES					Estimated average burden hours per		
Form 4 orresponseForm 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Sectionmay continue.30(h) of the Investment Company Act of 1940							0.5				
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person *2. IssuerSUMAS JOHNSymbol								5. Relationship of Reporting Person(s) to Issuer			
			VILLAG [VLGEA	E SUPEF	R MARF	KET I	NC	(Check all applicable)			
(Мо			(Month/Da	Month/Dav/Year) –				_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) below)			
,00 110 0111									EVP		
				l(Month/Day/Year) A				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SPRINGFIEI	LD, NJ 07081						-	Form filed by Mo Person			
(City)	(State)	(Zip)	Table	I - Non-De	rivative S	ecuri	ties Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)) Executi any	eemed ion Date, if n/Day/Year)	3. Transactio Code (Instr. 8)	4. Securi or(A) or D (Instr. 3,	ispose 4 and (A)	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
CLASS A COMMON STOCK	12/06/2017			S	5,000	D	\$ 23.498	130,605	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)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
I O	Director	10% Owner	Officer	Other			
SUMAS JOHN 733 MOUNTAIN AVENUE SPRINGFIELD, NJ 07081	Х	Х	EVP				
Signatures							
JOHN P.	107/2017						

JOINTI.	12/07/2017
SUMAS	12/07/2017
**Signature of	Data

<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.