BROOKS DAVID H

Form 4

November 10, 2004

(Last)

Stock

(First)

(Middle)

OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **BROOKS DAVID H** Issuer Symbol

(Month/Day/Year)

11/09/2004

(Street)

(Month/Day/Year)

11/09/2004

(Month/Day/Year)

11/09/2004

(Street)

(Street)

(Month/Day/Year)

10% Owner

2X_ Officer (give title ____Other (specify below))

Chairman & CEO

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

S Y BANCORP INC [SYI]

3. Date of Earliest Transaction

Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person

PROSPECT, KY 40059

Applicable Line)

X Form filed by More Reporting Person

Person

							1 015011		
(City)	(State)	(Zip) Ta	ble I - Non	-Derivati	ve Sec	urities Ac	quired, Disposed	of, or Benefic	cially 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. Securi on(A) or Di (Instr. 3,	ispose	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	n 11/09/2004		M	5,800 (1)	A	\$ 10.315	52,210	D	
Commo	n						3,554.45	I	by 401k-fbo David Brooks
Commo	n						45,656	I	By Spouse
Commo	n						1,078.485	I	Trust-Directors Deferred Comp Plan
Commo	n						15,162.2457	I	By ESOP-fbo

David Brooks

(Check all applicable)

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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)

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 coof 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 Securities Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option (Right to Buy)	\$ 0.4308					07/01/1984	01/01/2014	Common Stock	4,000
Option (Right to Buy)	\$ 10.315	11/09/2004		M	5,800	06/21/2001	12/21/2010	Common Stock	5,800
Option (Right to Buy)	\$ 16.8					06/27/2002	12/27/2011	Common Stock	24,000
Option (Right to Buy)	\$ 19.55					06/17/2003	12/17/2012	Common Stock	18,600
Option (Right to Buy)	\$ 21.18					06/16/2004	12/16/2013	Common Stock	16,700

Reporting Owners

Reporting Owner Name / Address	Relationships						
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other			
BROOKS DAVID H 4010 FOX MEADOW WAY PROSPECT, KY 40059	X		Chairman & CEO				

Reporting Owners 2

Signatures

//David H. Brooks 11/09/2004

**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) Exercise of stock options

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.

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