### Edgar Filing: Civitas Solutions, Inc. - Form 4

Form 4	tions, Inc.											
September 1	8, 2015											
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB AF OMB Number:	PPROVAL 3235-0287		
Check this box if no longer subject to Section 16. SECURITIES Expires: Expires: Expires: Expires:								Expires: Estimated a burden hou response	ours per			
(Print or Type I	Responses)											
MORRISSEY GERALD J. JR. Sym				2. Issuer Name <b>and</b> Ticker or Trading symbol Civitas Solutions, Inc. [CIVI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) ( AS SOLUTIONS CONGRESS STR	· ·	3. Date of (Month/D 09/16/2	Day/Year		ansaction			Director X Officer (give below)	10%	Owner er (specify	
				mendment, Date Original Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BOSTON, N	MA 02210								Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - No	n-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution Execution	med n Date, if Day/Year)	Code (Instr.	8)	4. Securi r(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	09/16/2015			F		861 <u>(1)</u>	D	\$ 26.41	26,761	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of ) Derivativ	6. Date Exer Expiration I (Month/Day e	Date	7. Title and Amount of Underlying Securities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene
	Derivative Security				Securities Acquired (A) or			(Instr. 3 and 4)	)	Owne Follo Repo
					Disposed of (D)					Trans (Instr
					(Instr. 3, 4, and 5)					
						Date Exercisable	Expiration Date	Amoun or Title Number of		
Dener				Code	V (A) (D)			Shares		

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# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MORRISSEY GERALD J. JR. C/O CIVITAS SOLUTIONS, INC. 313 CONGRESS STREET BOSTON, MA 02210			Chief Quality Officer					
Signatures								
/s/ Gina L. Martin, by power of attorney		09/18/2015						
**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) These shares were withheld by the Company to cover the payment of taxes incurred by the reporting person as a result of partial vesting of restricted stock units granted on September 16, 2014.

### **Remarks:**

#### Exhibit 24 - Power of Attorney

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.