## Edgar Filing: FARMERS NATIONAL BANC CORP /OH/ - Form 4

FARMERS NATIONAL BANC CORP /OH/ Form 4 September 04, 2015

September 04	4, 2015										
FORM			GEGUD				NOD			PPROVAL	
	UNITEDS	Washington, D.C. 20549									
subject to Section 16. SECURITIES									Expires: January 3 200 Estimated average burden hours per response 0.		
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> Strollo Gregg			2. Issuer Name <b>and</b> Ticker or Trading Symbol FARMERS NATIONAL BANC CORP /OH/ [FMNB]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 14 WINDEMERE PLACE			3. Date of Earliest Transaction (Month/Day/Year) 09/01/2015					_X_ Director 10% Owner Officer (give title Other (specify below) below)			
				4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>			
(City)	(State) (	Zip)	Table	e I - Non-D	erivative	Secur	ities Ac	quired, Disposed o	f, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/E	n Date, if	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	4 and (A) or	d 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)		
Farmers National Banc Corp. Common Stock	09/01/2015	09/04/2	015	P <u>(1)</u>	183	A	\$ 8.21	12,857	D		
Farmers National Banc Corp. Common Stock								392	I	By Spouse as Custodian for Son	

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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer Other					
Strollo Gregg 14 WINDEMERE PLACE POLAND, OH 44514	Х							
Signatures								
/s/ Carl D. Culp, attorney in fac Strollo	et for Gre	gg	09/04	4/2015				

<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).
- (1) Shares acquired pursuant to the terms of the Farmers National Banc Corp. Share Ownership Plan.

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.