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

#### FARMERS NATIONAL BANC CORP /OH/

Form 4 April 26, 2016

Banc Corp.

Common Stock

#### **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 Nicastro Mark A Issuer Symbol **FARMERS NATIONAL BANC** (Check all applicable) CORP /OH/ [FMNB] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X\_ Officer (give title Other (specify (Month/Day/Year) below) 20 SOUTH BROAD ST, PO BOX 04/22/2016 SVP/Human Resource Director 555 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting CANFIELD, OH 44406 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial (Instr. 3, 4 and 5) Owned Indirect (I) Ownership (Month/Day/Year) (Instr. 8) Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Price Code V Amount (D) **Farmers** National $A^{(1)}$ Banc Corp. 04/22/2016 4,524 Α \$0 14,787 D Common Stock **Farmers** National

By 401k

Plan

619

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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)

9. Nu Deriv Secur Bene Own Follo Repo Trans

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	<ol><li>Date Exer</li></ol>	cisable and	7. Title	and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	Expiration Date		t of	Derivative
Security	or Exercise		any	Code	of (Month/Day/Year)		Underly	ing	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	str. 8) Derivative		Securities		(Instr. 5)	
	Derivative			Securities			(Instr. 3 and 4)			
	Security				Acquired					
	·			(A) or						
					Dispose	1				
					of (D)					
					(Instr. 3.					
					4, and 5	)				
								A	Amount	
						Date	Expiration Date	0		
						Exercisable			Number	
						Ziterenducie Butte	o			
				Code	V (A) (D	)		S	hares	

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Nicastro Mark A 20 SOUTH BROAD ST PO BOX 555 CANFIELD, OH 44406

SVP/Human Resource Director

## **Signatures**

/s/ Carl D. Culp, attorney in fact for Mark A. Nicastro

04/26/2016

\*\*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) Award represents a grant of restricted stock which restrictions lapse on the third anniversary of the grant date.

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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