## Edgar Filing: Reineke Thomas - Form 4

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Reineke Tho	mas											
Form 4												
March 19, 20	19											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
	TATES S	SECURITIES AND EXCHANGE COMMIS Washington, D.C. 20549					COMMISSION	OMB Number:	3235-0287			
Check this if no long	er		OF CHANGES IN BENEFICIAL OWNERSHIP OF						Expires:	January 31,		
subject to		ENT OF							Estimated a	2005 average		
Section 10	SECURITIES						irs per					
Form 4 or Form 5				$( \cdot ) = f \cdot i \cdot $	C		1	A	response	0.5		
obligation	· ·						-	ge Act of 1934, of 1935 or Section				
may conti	nue.			vestment (	•	- ·			)11			
See Instru 1(b).	ction	50(II) 0	i uie iii	vestment	compan	y Aci	01 19	40				
1(0).												
(Print or Type R	esponses)											
1. Name and A	ddress of Reporting P	erson <sup>*</sup>	2. Issuer Name and Ticker or Trading				σ	5. Relationship of Reporting Person(s) to				
Reineke Tho		Symbol FIRST DEFIANCE FINANCIAL					Issuer	1 0				
		(	CORP [FDEF]					(Check all applicable)				
(Last)	(First) (M	(First) (Middle) 3. Date of						X Director 10% Owner				
	(	(Month/Day/Year)					Officer (give title Other (specify below)					
601 CLINTON STREET			03/19/2019					below)	below)			
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
		F	Filed(Month/Day/Year)					Applicable Line)				
	~~~							_X_ Form filed by	One Reporting Po More than One Ro			
DEFIANCE	, OH 43512							Person		oporting		
(City)	(State) (2	Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	ned 3. 4. Securities					5. Amount of Securities	6. Ownership	7. Nature of			
Security				on Date, if TransactionAcquired (A) or					Form: Direct	Indirect		
(Instr. 3) any (Month			CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(infoliate De	uy, 10ur)	(1150.0) (1150.0, 1 and 5)			Following	(Instr. 4)	(Instr. 4)			
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
G				Code V	Amount	(D)	Price	(instr. 5 und 1)				
Common	03/19/2019			А	132	А	\$0	9,371.1574 <u>(1)</u>	D			
Shares												
Common								1,950	Ι	By spouse		
Shares								,		Jarouse		

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.

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

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1	Director	ctor 10% Owner Office		r Other				
Reineke Thomas 601 CLINTON STREET DEFIANCE, OH 43512	Х							
Signatures								
/s/ Thomas A. Reineke by Kev P.O.A.		03/19/2019						
<u>**</u> Signature of Reporting		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) The ending balance differs from amounts previously reported because of shares acquired under an employee stock purchase 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.