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

FARMERS NATIONAL BANC CORP /OH/

Form 4 April 06, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

OMB APPROVAL

subject to Section 16. Form 4 or Form 5

obligations

may continue.

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

2. Issuer Name and Ticker or Trading

FARMERS NATIONAL BANC

30(h) of the Investment Company Act of 1940 See Instruction

Symbol

1(b).

(Print or Type Responses)

MACALI RALPH D

1. Name and Address of Reporting Person *

			FARMERS NATIONAL BANC CORP /OH/ [FMNB]			(Check all applicable)					
(Last) 1672 NOR	· · · · · ·	(Month	3. Date of Earliest Transaction (Month/Day/Year) 04/03/2017			_X_ Director Officer (gi below)	ive title 10% Owner Other (specify below)				
WADDEN	Filed(Month/Day/Year) Appli			Applicable Line) _X_ Form filed by	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting						
WARREN, OH 44483							Person				
(City)	(State)	(Zip) Ta	ble I - Non-I	Derivative	Secu	rities Aco	quired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	(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)		
Farmers National Banc Corp. Common Stock	04/03/2017	04/06/2017	P(1)	14	A	\$ 13.99	30,245 (2)	D			
Farmers National Banc Corp. Common Stock							18,158 <u>(3)</u>	I	By Ralph Macali, Trustee for RMS Trust		

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Farmers
National
Banc
Corp.
Common

By Ralph Macali, PMRP

Partnership

Stock

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.

Ι

SEC 1474 (9-02)

Shares

9. Nu

Deriv

Secu

Bene Own Follo Repo Trans (Instr

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. Transactic Code (Instr. 8)	5. DriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)
						Date Exercisable	Expiration Date	Title	Amount or Number of	

Code V (A) (D)

Reporting Owners

Reporting Owner Name / Address	Relationships						
· t	Director	10% Owner	Officer	Other			
MACALI RALPH D							
1672 NORTH RD.	X						
WARREN, OH 44483							

Signatures

/s/ Carl D. Culp, attorney in-fact for Ralph D. 04/06/2017 Macali

**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.

Reporting Owners 2

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- (2) Includes the acquisiton of 26 common shares pursuant to the Farmers National Banc Corp. (the "Company") Amended Dividend Reinvestment Plan during 1st Quarter 2017.
- (3) Includes the acquisiton of 64 common shares pursuant to the Farmers National Banc Corp. (the "Company") Amended Dividend Reinvestment Plan during 1st Quarter 2017.

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.