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FARMERS NATIONAL BANC CORP /OH/

Form 4

Common

Shares

November 14, 2014

FORM	1 <i>1</i>										OMB APPROVAL		
	CIVIII	ED STATE	OMB Number:	3235-028 January 31 200									
Check thi	E CHAN							Expires:					
Section 1	Subject to Section 16. Form 4 or								Estimated a burden hou response	average rs per			
obligation may cont <i>See</i> Instru 1(b).	ns inue. Section action	17(a) of the		ility H	old	ing Com	pany	Act of	ge Act of 1934, f 1935 or Sectio 40	n			
(Print or Type F	Responses)												
1. Name and Address of Reporting Person * Wallace Amber B			2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol FARMERS NATIONAL BANC CORP /OH/ [FMNB]						5. Relationship of Reporting Person(s) to Issuer			
		(Check all applicable)											
(Mon				ay/Year		nsaction			Director 10% Owner Officer (give title Other (specify below)				
20 SOUTH 555	BROAD ST, 1	РО ВОХ	11/12/20)14						ief Retail/Mark	teting		
	4. If Amer	4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check					
				th/Day/Y	ear)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
CANFIELD	O, OH 44406								Person		1		
(City)	(State)	(Zip)	Table	e I - Nor	ı-De	erivative S	Securi	ties Acc	quired, Disposed o	f, or Beneficial	lly Owned		
(Instr. 3) any			emed on Date, if /Day/Year)	on Date, if Transaction(A) Code (D)				d of	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code		V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(
Common Shares	11/12/2014			P(1)		24	A	\$ 8.48	3,193	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

I

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By Family

Member (2)

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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	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security	y Acquired								Follo	
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date Ti	Title	Number		
						Lacicisable			of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Wallace Amber B 20 SOUTH BROAD ST **PO BOX 555** CANFIELD, OH 44406

Sr VP/Chief Retail/Marketing

Signatures

/s/ Carl D. Culp, attorney in fact for Amber Wallace Soukenik

11/14/2014

**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.
- (2) The reporting person disclaims beneficial ownership of the reported securities except to the extent of her pecuniary interest

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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