## Edgar Filing: STOLLY TIMOTHY J. - Form 4

| STOLLY TIM  | IOTHY J.              |  |   |  |            |         |            |   |                   |                         |  |
|---|-----------------------|--|---|--|------------|---------|------------|---|-------------------|-------------------------|--|
| Form 4  |                       |  |   |  |            |         |            |   |                   |                         |  |
| February 05, 2  | 2018                  |  |   |  |            |         |            |   |                   |                         |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION |                       |  |   |  |            |         |            | OMB AF  | OMB APPROVAL      |                         |  |
|   | UNITED S              | FATES S                                    |   |  |            |         | IGE CO     | OMMISSION   | OMB               | 3235-0287               |  |
| Check this  | hov                   |  | Wash  | ington, I                              | D.C. 205   | 49      |            |   | Number:           |                         |  |
| if no longer  |                       |  |   |  |            | ~       | <b></b>    |   | Expires:          | January 31,<br>2005     |  |
| subject to  | STATEMI               | ENT OF O                                   |   |  |            | CIAL    | LOWN       | ERSHIP OF   | Estimated average |                         |  |
| Section 16.   |                       | SECURITIES                                 |   |  |            |         |            | burden hours per  |                   |                         |  |
| Form 4 or<br>Form 5                                     | Filed pure            | unt to So                                  | ation 16  | (a) of the                             | Soouriti   | oo Ev   | ahanga     | A at of $1024$  | response          | 0.5                     |  |
| obligations   | <b>^</b>              |  |   |  |            |         | •          | Act of 1934,<br>1935 or Section   |                   |                         |  |
| may contin  | ue.                   |  |   | estment C                              | <b>U</b> . |         |            |   | L                 |                         |  |
| See Instruct<br>1(b).                                   | tion                  | 20(11) 01                                  |   |  | ompuny     | 1100    | 01 17 10   | <b>,</b>  |                   |                         |  |
| - (-)-  |                       |  |   |  |            |         |            |   |                   |                         |  |
| (Print or Type Re                                       | sponses)              |  |   |  |            |         |            |   |                   |                         |  |
| 1. Name and Add   | dress of Reporting Pe | erson *                                    | 2 Issuer N  | Jame <b>and</b> T                      | icker or T | rading  | r .        | 5. Relationship of I  | Reporting Pers    | on(s) to                |  |
|   |                       |  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol |  |            |         | >          | Issuer  |                   |                         |  |
| SB FINANCIAL GROUP, INC.                                |                       |  |   |  |            |         |            |   |                   |                         |  |
|   |                       |  | SBFG]   |  |            |         |            | (Check  | all applicable    | )                       |  |
| (Last)  | (First) (Mi           | ddle) 3.                                   | . Date of E   | arliest Trar                           | isaction   |         |            | X Director  | 10%               | Owner                   |  |
| (Mon  |                       |  | Month/Day/Year)                                       |  |            |         |            | Officer (give title Other (specify below)                                       |                   |                         |  |
| 700 BLUFF C   | DAK TRAIL             | 1  | 2/06/201  | 17                                     |            |         |            | below)  | Delow)            |                         |  |
|   | (Street)              | 4.   | 4. If Amendment, Date Original                        |  |            |         |            | 6. Individual or Joint/Group Filing(Check                                       |                   |                         |  |
|   |                       |  | iled(Month/Day/Year)                                  |  |            |         |            | Applicable Line)  |                   |                         |  |
|   |                       |  |   |  |            |         |            | _X_ Form filed by One Reporting Person<br>Form filed by More than One Reporting |                   |                         |  |
| LIMA, OH 45   | 5807                  |  |   |  |            |         |            | Person  | ore than one Re   | porting                 |  |
| (City)  | (State) (Z            | ip)  | Table 1   | I - Non-De                             | rivative S | ecurit  | ies Acqu   | ired, Disposed of,  | or Beneficial     | ly Owned                |  |
| 1.Title of  | 2. Transaction Date   | 2A. Deem                                   | ned   | 3.                                     | 4. Securi  | ities A | cquired    | 5. Amount of  | 6.                | 7. Nature of            |  |
| Security  | (Month/Day/Year)      | Date, if Transaction(A) or Disposed of (D) |   |  |            |         | Securities | Ownership   | Indirect          |                         |  |
| (Instr. 3)  |                       | any<br>(Month/D                            | )av/Year)   | Code (Instr. 3, 4 and 5)<br>(Instr. 8) |            |         |            | Beneficially<br>Owned   |                   | Beneficial<br>Ownership |  |
|   |                       | (Wonth'D                                   | /ay/10al)   | (1130.0)                               |            |         |            | Following   | or Indirect       | (Instr. 4)              |  |
|   |                       |  |   |  |            | (A)     |            | Reported  | (I)               |                         |  |
|   |                       |  |   |  |            | or      |            | Transaction(s) (Instr. 3 and 4)   | (Instr. 4)        |                         |  |
| 0010100   |                       |  |   | Code V                                 | Amount     | (D)     | Price      | (insu: 5 and 4)   |                   |                         |  |
| COMMON  | 12/06/2017            |  |   | Р                                      | 175        | А       | \$         | 7,018   | D                 |                         |  |
| STOCK   |                       |  |   |  |            |         | 17.65      |   |                   |                         |  |
|   |                       |  |   |  |            |         |            |   |                   |                         |  |

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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | Date               | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owno<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|--|--|---|--|
|   |   |   |   | Code V                                |   | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |

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## **Reporting Owners**

| Reporting Owner Name / Addre                               | Relationships |           |               |  |  |  |  |
|--|---------------|-----------|---------------|--|--|--|--|
|  | Director      | 10% Owner | Officer Other |  |  |  |  |
| STOLLY TIMOTHY J.<br>700 BLUFF OAK TRAIL<br>LIMA, OH 45807 | Х             |           |               |  |  |  |  |
| Signatures   |               |           |               |  |  |  |  |
| TIMOTHY J.<br>STOLLY                                       | 02/05/2018    |           |               |  |  |  |  |
| <u>**</u> Signature of Reporting<br>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).

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.