Wallace Sarah Form 5 January 07, 2013

FORM 5

OMB APPROVAL

Check th				ND EXCHANGE C	OMMISSION	Number:	3235-0362		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act Form 4 Transactions Washington, D.C. 20549 Washington, D.C. 20549 Washington, D.C. 20549 Washington, D.C. 20549 OWNERSHIP OF CHANGES IN BENEFI OWNERSHIP OF SECURITIES OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1930 Reported 30(h) of the Investment Company Act of 1940 Transactions						Expires: Estimated burden ho response.	urs per		
Reported . Name and Vallace Sa	Address of Reporting	Symbol	NATIONA	cker or Trading L CORP /OH/	5. Relationship of Issuer (Chec	f Reporting Pe	`,		
(Last)	· · · · · ·	(Month 12/31)	/Day/Year)	's Fiscal Year Ended	X Director 10% Owner Officer (give title below) Other (specify below)				
0 NORTH	H THIRD STREET	Γ							
	(Street)		nendment, Date (onth/Day/Year)	6. Individual or Joint/Group Reporting (check applicable line)					
NEWARK	, OH 43055				_X_ Form Filed by Form Filed by Person	1 0			
(City)	(State)	(Zip) Ta	ble I - Non-De	rivative Securities Acq	uired, Disposed o	f, or Benefici	ally Owned		
Title of ecurity Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

		(Month/Day/Year)	(Instr. 8)	Amount	(A) or (D)	Price	of Issuer's Fiscal Year (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock	12/31/2012	Â	J	52.9699	A	\$ (1)	392.3236	I	DRIP
Common Stock	Â	Â	Â	Â	Â	Â	2,349	I	Sarah R Wallace Grantor Trust
Common Stock	Â	Â	Â	Â	Â	Â	720	D	Â

Reminder: Resecurities ben	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 2270 (9-02)		
Common Stock	Â	Â	Â	Â	Â	Â	525	I	By Self as Trustee for Managing Agency Account for benefit of immediate family member
Common Stock	Â	Â	Â	Â	Â	Â	525	I	By Self as Trustee for Managing Agency Account for benefit of immediate family member
Common Stock	Â	Â	Â	Â	Â	Â	525	I	By Self as Trustee for Managing Agency Account for benefit of immediate family member

 $\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		/. Title		8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D		Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
					i, and 5)					
									Amount	
						Data	Evaluation		or	
						Date	Expiration	Title Nu	Number	
						Exercisable	Date		of	
					(A) (D)				Shares	
					. , . ,					

Of D So B O

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Wallace Sarah
50 NORTH THIRD STREET Â X Â Â

NEWARK, OHÂ 43055

Signatures

Sarah R. Wallace by David L. Trautman, POA 01/07

01/07/2013

**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) DRIP update

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

Reporting Owners 3