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Gerzina Josej Form 4 August 28, 20											
FORM	Л	статгс	SECUD	TIFS AT		1 I I I I	NCF	COMMISSION	r	PPROVAL	
	UNITED	DIAILS		hington, l			NGE V		OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section				GES IN E SECURI	BENEFI TIES	CIAI			Expires: Estimated burden hou response	urs per	
obligation may conti <i>See</i> Instru 1(b).	$\frac{18}{1000}$ Section 17(a	a) of the		lity Hold	ing Com	pany	Act o	f 1935 or Sectio	n		
(Print or Type R	Responses)										
Gerzina Joseph A S			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)			
(Last) (First) (Middle) 3. Date				e of Earliest Transaction n/Day/Year)				Director 10% Owner Officer (give title Other (specify below) below) below) SVP, CLO & Regional Pres			
				ndment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)		(Zip)						Person			
		-					ties Ac	quired, Disposed of		-	
(Instr. 3) any		Execution any	emed 3. 4. Securities on Date, if TransactionAcquired (A) or Code Disposed of (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Farmers National Banc Corp. Common	08/27/2018			Code V	Amount 4,759		Price \$ 16	(Instr. 3 and 4) 24,177	D		
Stock Farmers National Banc Corp. Common Stock								3,814	I	By 401k Plan	

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amoun	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	'Year)	Underly	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration		Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
				Code V	(\mathbf{A}) (\mathbf{D})				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Gerzina Joseph A 20 SOUTH BROAD ST PO BOX 555 CANFIELD, OH 44406			SVP, CLO & Regional Pres				
Signatures							
/s/ Carl D. Culp, attorney in fac Gerzina	et for Jose	08/28/2018					
**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).

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.