CULP CARL D

Form 4

Stock

December 31, 2018

| Check this be if no longer subject to Section 16. Form 4 or Form 5 obligations may continue | STATEMENT O Filed pursuant to Section 17(a) of the | S SECURITIES AND EXCHANG Washington, D.C. 20549 F CHANGES IN BENEFICIAL O SECURITIES Section 16(a) of the Securities Exch Public Utility Holding Company A | OWNERSHIP OF ange Act of 1934, ct of 1935 or Sectio | Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response 0.5 |
|--|--|---|---|--|
| See Instruction 1(b). (Print or Type Resp. | J | of the Investment Company Act of | 1940 | |
| | ress of Reporting Person * | 2. Issuer Name and Ticker or Trading Symbol FARMERS NATIONAL BANC CORP /OH/ [FMNB] | Issuer | f Reporting Person(s) to |
| (Last) 20 SOUTH BR 555 | (First) (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 12/28/2018 | Director X Officer (give below) | e title 10% Owner Other (specify below) EVP/CFO |
| CANFIELD, O | (Street) OH 44406 | 4. If Amendment, Date Original Filed(Month/Day/Year) | Applicable Line) _X_ Form filed by 0 | oint/Group Filing(Check One Reporting Person More than One Reporting |
| (City) | (State) (Zip) | Table I - Non-Derivative Securities | | f, or Beneficially Owned |
| | . Transaction Date 2A. Dec Month/Day/Year) Executi any (Month | | Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4) |
| Farmers National Banc Corp. 1 Common Stock | 2/28/2018 | | (Instr. 3 and 4) 0 45,921 | D |
| Farmers National Banc Corp. Common | | | 9,194 | 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.

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9. Nu Deriv Secur 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 | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exerc | isable and | 7. Titl | e and | 8. Price of | 9 |
|-------------|-------------|---------------------|--------------------|-------------|------------|---------------|------------|---------|----------|-------------|---|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transaction | orNumber | Expiration Da | ate | Amou | int of | Derivative | J |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | lying | Security | , |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Securi | ities | (Instr. 5) |] |
| | Derivative | | | | Securities | | | (Instr. | 3 and 4) | | (|
| | Security | | | | Acquired | | | | | |] |
| | | | | | (A) or | | | | | | J |
| | | | | | Disposed | | | | | | - |
| | | | | | of (D) | | | | | | (|
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | A | | |
| | | | | | | | | | Amount | | |
| | | | | | | Date | Expiration | m: .1 | or | | |
| | | | | | | Exercisable | Date | Title | Number | | |
| | | | | C 1 17 | (A) (D) | | | | of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships |
|--------------------------------|---------------|
| Nebulung Owner Maine/Audress | |

Director 10% Owner Officer Other

CULP CARL D 20 SOUTH BROAD ST. PO BOX 555 CANFIELD, OH 44406

EVP/CFO

Signatures

Carl D. Culp 12/31/2018

**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.

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