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Form 4											
February 07,									omb af	PROVAL	
FORN Check thi	UNITE	D STATES		ITIES A hington,			NGE C	OMMISSION	OMB Number:	3235-0287	
if no long subject to Section 1 Form 4 o Form 5	ger STAT 6. r	statement of changes in Beneficial ownership of								January 31, 2005 verage rs per 0.5	
obligation may cont <i>See</i> Instru 1(b).	ns Section 1	7(a) of the		ility Hold	ing Com	ipany	Act of	1935 or Section	ı		
(Print or Type F	Responses)										
(Symbol ORRST	Name and OWN FIN	NANCIA		g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle)			3. Date of (Month/D	SERVICES INC [ORRF] 3. Date of Earliest Transaction (Month/Day/Year) 02/05/2019				Director 10% Owner Officer (give title Other (specify below) Delow) Chief Risk Officer			
SHIPPENSI	(Street) BURG, PA 172	257		ndment, Dat th/Day/Year)	-			6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person	One Reporting Pe	rson	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	any		emed 3. 4. Securities Acquire on Date, if Transaction(A) or Disposed of (I Code (Instr. 3, 4 and 5) 'Day/Year) (Instr. 8) (A)			cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership	7. Nature of ership Indirect n: Direct Beneficial or Ownership rect (I) (Instr. 4)		
-				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Orrstown Financial Services, Inc. Common, Restricted Stock	02/05/2019			D	600	D	\$ 18.96	24,830	D		

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

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number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e			tle and unt of rrlying rities . 3 and 4)	Derivative	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
Repo	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owner Name / Addre	SS	Relationships							
	Director	10% Owner	Officer	Other					
Coradi Robert G 77 EAST KING STREET SHIPPENSBURG, PA 1725'	7		Chief Risk Officer						
Signatures									
Casara I. Kieffer	02/06/2019								
<u>**</u> 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.