## Edgar Filing: ORRSTOWN FINANCIAL SERVICES INC - Form 4

| ORRSTOWN<br>Form 4<br>May 03, 2017  | N FINANCIAL SE<br>7                     | ERVICES INC   |  |                                 |  |   |   |  |           |  |
|---|---|---|--|---------------------------------|--|---|---|--|-----------|--|
| <b>FORM</b><br>Check this<br>if no long<br>subject to<br>Section 10<br>Form 4 or    | Was                                     | S SECURITIES AND EXCHANGE COM<br>Washington, D.C. 20549<br>F CHANGES IN BENEFICIAL OWNE<br>SECURITIES |  |                                 |  |   |   | rs per   |           |  |
| Form 5<br>obligation<br>may conti<br><i>See</i> Instru<br>1(b).<br>(Print or Type R | nue. Section 17(a)                      | uant to Section 16<br>of the Public Ut<br>30(h) of the Inv  | ility Hold   | ing Com                         | pany                                   | Act of  | 1935 or Sectio  | n  |           |  |
| Stoner Floyd E Sy   |   |   | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>ORRSTOWN FINANCIAL<br>SERVICES INC [ORRF] |                                 |  |   | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)   |  |           |  |
| (Last)<br>77 EAST KI  | (Month/Da                               | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>05/02/2017                                     |  |                                 | X_ Director<br>Officer (give<br>below) | Director 10% Owner<br>fficer (give title Other (specify<br>below) |   |  |           |  |
|   |   |   | ndment, Date Original<br>tth/Day/Year)   |                                 |  |   | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting<br/>Person</li> </ul> |  |           |  |
| (City)  | (State) (Z                              | Zip) Table  | e I - Non-Do   | erivative S                     | Securit                                | ies Acq   | uired, Disposed of  | f, or Beneficial   | lly Owned |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction Date<br>(Month/Day/Year) |   | Code<br>(Instr. 8)   | on(A) or D<br>(D)<br>(Instr. 3, | isposed<br>4 and<br>(A)<br>or          | d of<br>5)  | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)  | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |           |  |
| Orrstown<br>Financial<br>Services,<br>Inc.<br>Common,<br>Restricted<br>Stock        | 05/02/2017                              |   | A A  | Amount<br>1,000                 |  | Price<br>\$<br>21.9   | 1,000   | D  |           |  |

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

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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<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. | ınt 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                                | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |

# **Reporting Owners**

| <b>Reporting Owner Name / Addres</b>                            | ress Relationships |           |         |       |  |  |  |  |
|---|--------------------|-----------|---------|-------|--|--|--|--|
|   | Director           | 10% Owner | Officer | Other |  |  |  |  |
| Stoner Floyd E<br>77 EAST KING STREET<br>SHIPPENSBURG, PA 17257 | X<br>7             |           |         |       |  |  |  |  |
| Signatures  |                    |           |         |       |  |  |  |  |
| Barbara E.<br>Brobst  | 05/02/2017         |           |         |       |  |  |  |  |
| <pre>**Signature of Reporting Person</pre>                      | 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.