## Edgar Filing: BROBST BARBARA E - Form 4

BROBST BA	ARBARA E									
Form 4 January 19, 2	2018									
	ГЛ							OMB AF	PROVAL	
FORM	RITIES AND EXCHANGE CO ashington, D.C. 20549				OMMISSION	OMB Number:	3235-0287			
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. Filed purs inue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section								
(Print or Type F	Responses)									
			2. Issuer Name <b>and</b> Ticker or Trading Symbol ORRSTOWN FINANCIAL SERVICES INC [ORRF]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(M			3. Date of Earliest Transaction Month/Day/Year) 01/18/2018				Director10% Owner XOfficer (give titleOther (specify below) below) Executive Vice President			
	nendment, Da onth/Day/Year	-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
SHIPPENSI	BURG, PA 17257						Form filed by M Person	ore than One Re	porting	
(City)	(State) (Z	Zip) Ta	ble I - Non-E	Derivative S	Securi	ities Acq	uired, Disposed of	, or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code r) (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Orrstown Financial Services, Inc. Common, Restricted Stock	01/18/2018		A	3,596		\$ 25.65	21,790.55	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 (9-02) 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 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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
_				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Amount or Title Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address			Relationships		
	Director	10% Owner	Officer	Other	
BROBST BARBARA E 77 EAST KING STREET SHIPPENSBURG, PA 17257			Executive Vice President		
Signatures					

Casara I. Kieffer 01/19/2018

<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.