## Edgar Filing: ACNB CORP - Form 4

| Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>Filed purs | Was<br>ENT OF CHANG<br>uant to Section 16<br>) of the Public Uti | ITIES AND EXCHANGE<br>hington, D.C. 20549<br>GES IN BENEFICIAL OV<br>SECURITIES<br>5(a) of the Securities Exchan<br>ility Holding Company Act<br>vestment Company Act of 19 | <b>VNERSHIP OF</b><br>nge Act of 1934,<br>of 1935 or Section  | OMB<br>Number:<br>Expires:<br>Estimated av<br>burden hour<br>response  | •   |  |  |
|--|--|---|---|--|---|--|--|
| (Print or Type Responses)  |  |   |   |  |   |  |  |
| 1. Name and Address of Reporting P<br>RITTER THOMAS A  | Symbol   | Name and Ticker or Trading CORP [ACNB]  | Issuer  | <ul> <li>Relationship of Reporting Person(s) to<br/>ssuer</li> <li>(Check all applicable)</li> </ul>   |   |  |  |
| (Last) (First) (M<br>P.O. BOX 248  | iddle) 3. Date of<br>(Month/Da<br>06/14/20                       | -   | _X_ Director<br>_X_ Officer (give t<br>below)   | XDirector10% Owner<br>XOfficer (give titleOther (specify   |   |  |  |
| (Street) ARENDLSVILLE, PA 17303  | Filed(Month/Day/Year)  |   |   | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person<br>Form filed by More than One Reporting |   |  |  |
| AKENDES VILLE, FA 17505 Person   |  |   |   |  |   |  |  |
|  | Table  | e I - Non-Derivative Securities A   |   |  |   |  |  |
| 1.Title of<br>Security<br>(Instr. 3)2. Transaction Data<br>(Month/Day/Year)                      |  | Transactionor Disposed of (D)<br>Code (Instr. 3, 4 and 5)<br>(Instr. 8)<br>(A)<br>or  | ed (A) 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) |  | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| ACNB<br>Corporation 06/14/2013<br>Common   | 06/19/2013 <u>(1)</u>  | P - 9146341 A   | \$ 5,282.2821   | D  |   |  |  |
| ACNB<br>Corporation<br>Common  |  |   | 3,059.647   | I  | Spouse  |  |  |

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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 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>Transactio<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) |                     | ate                | 7. Tit<br>Amou<br>Under<br>Secur<br>(Instr | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<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 / Address</b>                     | Relationships |           |                 |       |  |  |
|---|---------------|-----------|-----------------|-------|--|--|
|   | Director      | 10% Owner | Officer         | Other |  |  |
| RITTER THOMAS A<br>P.O. BOX 248<br>ARENDLSVILLE, PA 17303 | Х             |           | President & CEO |       |  |  |
| Signatures  |               |           |                 |       |  |  |
| Thomas A.   |               |           |                 |       |  |  |

| Ritter                             | 06/19/2013 |  |  |
|------------------------------------|------------|--|--|
| **Signature of<br>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).

(1) The date of execution was determined in accordance with SEC Rule 16a-3(g)(2) and (g)(4).

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.