Edgar Filing: SB FINANCIAL GROUP, INC. - Form 4

SB FINANCIA Form 4 January 04, 20		NC.									
FORM	4								OMB AF	PROVAL	
Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
	Section 16. SECURITIES					ERSHIP OF	Expires: January 3 200 Estimated average burden hours per response 0				
Form 5 obligations may continu <i>See</i> Instruct 1(b).	Bection 17((a) of the		ity Holdir	ng Comp	any A	Act of	e Act of 1934, 1935 or Sectior 0		0.5	
(Print or Type Res	sponses)										
:							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 135 BIEDE Pl	ast) (First) (Middle) 3. Date of (Month/I) BIEDE PLACE 01/03/2			-				XDirector10% Owner Officer (give titleOther (specify below) below)			
	(Street) 4. If Amend Filed(Month			lment, Date Original /Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
DEFIANCE, O	OH 43512							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Table l	- Non-Der	ivative Se	ecuriti	es Acqu	iired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execut any	eemed tion Date, if h/Day/Year)	3. Transactic Code (Instr. 8) Code V	on(A) or D (D) (Instr. 3,	4 and (A) or	d of 5) Price	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)	
COMMON STOCK	01/03/2017			А	2,500	А	\$ 6.98 (1)	11,575	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 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)	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
		Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addre	Relationships							
	Director	10% Owner	Officer Other					
Kissner Rita A 135 BIEDE PLACE DEFIANCE, OH 43512	Х							
Signatures								
RITA A. KISSNER	01/04/2017							
**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).

(1) THE 2,500 SHARES IS AN EXERCISED STOCK OPTION TRANSACTION AT THE GRANTED PRICE OF \$6.98/SH

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.