Edgar Filing: Woods Karen B - Form 4

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Form 4											
April 03, 201	А								OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE Washington, D.C. 20549						NGE C	OMMISSION	OMB Number:	3235-0287		
Check thi if no long subject to Section 1 Form 4 of	er STATH 6.								Expires: Estimated a burden hour response	ed average hours per	
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the	Public U		ling Con	ipany	y Act of	e Act of 1934, 1935 or Section 0			
(Print or Type R	Responses)										
Woods Karen B Symbol FIRST			Symbol	Issuer Name and Ticker or Trading nbol RST FINANCIAL BANCORP				5. Relationship of Reporting Person(s) to Issuer			
			/OH/ [F	(Che					ck all applicable)		
(Last) (First) (Middle) 3. Date of (Month/D) 255 EAST 5TH STREET, SUITE 04/02/20 2900 04/02/20				-				Director 10% Owner X Officer (give title Other (specify below) below) General Counsel & CRO			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CINCINNA	TI, OH 45202							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	ned n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	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)	Indirect Beneficial	
Common Stock	04/02/2019			F	341	D	\$ 24.52	22,782	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)

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Woods Karen B			General				
255 EAST 5TH STREET, SUITE 2900			Counsel &				
CINCINNATI, OH 45202			CRO				
Signatures							

/s/ Denise R. 04/03/2019 Manus, POA

<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.