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Form 4											
August 30, 20									OMB AF	PROVAL	
FORM	4 UNITED S	TATES		FIES AN ington, D			GE CC	OMMISSION	OMB Number:	3235-0287	
Check this if no longer subject to Section 16. Form 4 or	box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP							ERSHIP OF	Expires: Estimated a burden hou		
Form 5 obligations may contin See Instruct 1(b).	ue. Section 17(a)) of the		ty Holdin	ng Comp	oany .	Act of 1	Act of 1934, 935 or Section	response	0.5	
(Print or Type Re	sponses)										
			2. Issuer Name and Ticker or Trading Symbol FRANKLIN FINANCIAL				1	5. Relationship of Reporting Person(s) to Issuer			
	SERVICES CORP /PA/ [FRAF]				I	(Check all applicable)					
(Last) (First) (Middle) 20 SOUTH MAIN STREET			3. Date of Earliest Transaction (Month/Day/Year) 08/29/2018					Director 10% Owner 0ther (specify below) below) svp			
	(Street) 4. If Amena Filed(Month			dment, Date Original h/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CHAMBERS	BURG, PA 1720)1					-	Form filed by Mo Person			
(City)	(State) (Z	Zip)	Table I	- Non-Dei	rivative Se	ecuriti	ies Acqui	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execut any	eemed tion Date, if h/Day/Year)	3. Transactio Code (Instr. 8)	4. Securi or(A) or Di (Instr. 3,	ispose	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)	
Franklin Financial Services Corporation	08/29/2018			Code V P	Amount	(D) A	Price \$ 34.78	614 <u>(1)</u>	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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 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. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Unde Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh		
i o	Director	10% Owner	Officer	Other
Carmack Karen K 20 SOUTH MAIN STREET CHAMBERSBURG, PA 17201			svp	
Signatures				
Karen K. Carmack, by Amanda Secretary	M. Ducey	v, Corporate		08/30/2018
<u>**</u> Signature of Repor	ting 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) Total shares includes 5 shares purchased through the DRIP

Remarks:

POA on file with Corporation.

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.