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Form 4 February 28, 2										
FORM								OMB AF	PROVAL	
	UNITEDS		URITIES AN Vashington, I			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 OWNERS					ERSHIP OF	Expires: Estimated a burden hou response			
Form 5 obligations may contin <i>See</i> Instruc 1(b).	ue. Section 17(a)	of the Public	n 16(a) of the Utility Holdi Investment C	ng Comp	pany .	Act of 1	935 or Section		0.0	
(Print or Type Re	sponses)									
Carmack Karen K S			2. Issuer Name and Ticker or Trading Symbol FRANKLIN FINANCIAL				5. Relationship of Reporting Person(s) to Issuer			
			VICES CORF		RAF]	l	(Check	all applicable)	
(Last) 20 SOUTH M	(First) (Mid	(Mont	e of Earliest Trai h/Day/Year) 5/2019	nsaction			Director _X Officer (give pelow)		Owner er (specify	
	(Street)		mendment, Date Month/Day/Year)	e Original		A	5. Individual or Joi Applicable Line) X_ Form filed by O		-	
CHAMBERS	BURG, PA 1720	1				-	Form filed by Me Person			
(City)	(State) (Z	^{ip)} T	able I - Non-De	rivative Se	ecuriti	ies Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Dat any (Month/Day/Y	Code	4. Securi on(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Franklin Financial Services Corporation	02/26/2019		Code V F	Amount	(D) D	Price \$ 36.43	(Instr. 3 and 4) 854	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.

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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. Transactic Code (Instr. 8)	5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shares
Franklin Financial Services Corporation Incentive Stock Opti	\$ 16.11	02/26/2019		Х	407	08/26/2009	02/26/2019	Franklin Financial Services Corporation	407

Reporting Owners

Reporting Owner Name / Address		Relationsh		
	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	, Corporate		02/28/2019
<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).

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.