

First Savings Financial Group Inc
 Form 4
 December 29, 2014

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 Eckart Samuel E

2. Issuer Name and Ticker or Trading Symbol
 First Savings Financial Group Inc [FSFG]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 501 E. LEWIS & CLARK PARKWAY
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 12/24/2014

Director 10% Owner
 Officer (give title below) Other (specify below)
 Executive Vice President

CLARKSVILLE, IN 47129

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D)	Price		
				Code V	Amount		
Common Stock	12/24/2014		M	12,000	A \$ 13.25	16,176 ⁽¹⁾	D
Common Stock						1,017 ⁽¹⁾	I By Stock Award ⁽²⁾
Common Stock						3,717 ⁽³⁾	I By ESOP

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

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of 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)	Amount or Number of Shares
Incentive Stock Options	\$ 13.25	12/24/2014		M	12,000	05/18/2011 ⁽⁴⁾ 05/18/2020	Common Stock	12,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Eckart Samuel E 501 E. LEWIS & CLARK PARKWAY CLARKSVILLE, IN 47129	X		Executive Vice President	

Signatures

/s/ John P. Lawson, Jr., pursuant to power of attorney

12/29/2014

__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) Since the reporting person's last report, 4,076 shares previously held through Stock Award have vested and are now owned directly.
- (2) Stock Awards granted pursuant to the First Savings Financial Group, Inc. 2010 Equity Incentive Plan vest in five approximately equal annual installments commencing on May 18, 2011.
- (3) Reflects transactions not required to be reported pursuant to Section 16 of the Securities Act of 1934, as amended.
- (4) Incentive Stock Options granted pursuant to the First Savings Financial Group, Inc. 2010 Equity Incentive Plan vest in five approximately equal annual installments commencing on May 18, 2011.

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.