FNB CORP/PA/ Form 4 November 07, 2016

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

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* NALBANDIAN GARY L

2. Issuer Name and Ticker or Trading Symbol

FNB CORP/PA/ [FNB]

(First) (Middle) (Last) 3. Date of Earliest Transaction

> (Month/Day/Year) 11/03/2016

ONE NORTH SHORE CENTER, 12 FEDERAL STREET

> (Street) 4. If Amendment, Date Original

> > Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X\_ Director

Officer (give title

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

5. Relationship of Reporting Person(s) to

(Check all applicable)

10% Owner

Other (specify

Issuer

below)

PITTSBURGH, PA 15212

(City) (State) (Zip)

Conversion

or Exercise

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

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) (Instr. 3)

Derivative

Security

3. Execution Date, if (Month/Day/Year)

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

(A)

or

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership (Instr. 4) (Instr. 4)

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price

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 3. Transaction Date 3A. Deemed 4.

(Month/Day/Year) Execution Date, if

5. Number of TransactionDerivative

6. Date Exercisable and **Expiration Date** 

7. Title and Amount Underlying Securities (Instr. 3 and 4)

any Code Securities (Month/Day/Year)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou Numb Shares
Stock Options (Granted 2/20/2009)	\$ 6.82	11/03/2016		M	61,261	02/20/2009	02/13/2019	Common Stock	61,2
Stock Options (Granted 2/19/2010)	\$ 5.18	11/03/2016		M	56,952	02/19/2010	02/13/2019	Common Stock	56,9
Stock Options (Granted 3/27/2012)	\$ 4.96	11/03/2016		M	118,650	03/27/2012	02/13/2019	Common Stock	118,0
Stock Options (Granted 2/21/2014)	\$ 8.24	11/03/2016		M	9,492	02/21/2014	02/13/2019	Common Stock	9,49
Stock Options (Granted 2/20/2015)	\$ 10.72	11/03/2016		M	14,238	02/20/2015	02/13/2019	Common Stock	14,2
Stock Options (Granted 2/16/2007)	\$ 12.02	11/03/2016		M	68,798	02/16/2007	02/13/2019	Common Stock	68,7
Stock Options (Granted 2/22/2008)	\$ 11.38	11/03/2016		M	67,146	02/22/2008	02/13/2019	Common Stock	67,1
Stock Options (Granted 2/18/2011)	\$ 5.08	11/03/2016		M	98,610	02/18/2011	02/13/2019	Common Stock	98,6

# **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
	*7					

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NALBANDIAN GARY L ONE NORTH SHORE CENTER 12 FEDERAL STREET PITTSBURGH, PA 15212

## **Signatures**

/s/Gary L. Nalbandian

11/07/2016

\*\*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.

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