## Edgar Filing: Williams James Eugene - Form 4

| Williams Jame   | s Eugene                   |  |  |            |                              |                       |   |                                  |              |  |  |
|---|----------------------------|--|--|------------|------------------------------|-----------------------|---|----------------------------------|--------------|--|--|
| Form 4  |                            |  |  |            |                              |                       |   |                                  |              |  |  |
| March 08, 201   | 1                          |  |  |            |                              |                       |   |                                  |              |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION |                            |  |  |            |                              |                       |   | OMB AF                           | PROVAL       |  |  |
| Washington, D.C. 20549                                  |                            |  |  |            |                              | 1MISSION              | OMB<br>Number:  | 3235-0287<br>January 31,<br>2005 |              |  |  |
| Check this l<br>if no longer                            |                            |  |  |            |                              |                       |   |                                  |              |  |  |
| subject to  | ES IN BENEFICIAL OWNERSHIP |  |  |            | RSHIP OF                     | Estimated a           |   |                                  |              |  |  |
| Section 16.<br>Form 4 or                                | SECURITI                   | SECURITIES                             |  |            |                              | burden hours per      |   |                                  |              |  |  |
| Form 5  | Filed nursu                | ant to Section 16(                     | (a) of the Se                                | ecurities  | Fxch                         | ange Ad               | rt of 1934  | response                         | 0.5          |  |  |
| obligations   | Section $17(a)$            | of the Public Util                     |  |            |                              | -                     |   |                                  |              |  |  |
| may continu<br>See Instruct                             | le.                        | 30(h) of the Inve                      | • •  |            | •                            |                       |   |                                  |              |  |  |
| 1(b).   |                            |  |  |            |                              |                       |   |                                  |              |  |  |
| (Print or Type Res                                      | sponses)                   |  |  |            |                              |                       |   |                                  |              |  |  |
| Williams James Eugene Symbol                            |                            |  | 6  |            |                              |                       | 5. Relationship of Reporting Person(s) to Issuer              |                                  |              |  |  |
|   |                            |  |  |            |                              |                       | (Check all applicable)  |                                  |              |  |  |
| (Last) (First) (Middle) 3. Date of Ea                   |                            |  | arliest Transaction                          |            |                              |                       | (Check an applicable)   |                                  |              |  |  |
|   |                            | (Month/Day                             | //Year)                                      |            |                              | X                     | Director  |                                  | Owner        |  |  |
|   |                            |  | 011  |            |                              |                       | Officer (give title     Other (specify below)                 |                                  |              |  |  |
|   |                            |  | -  |            |                              |                       | 6. Individual or Joint/Group Filing(Check<br>Applicable Line) |                                  |              |  |  |
| GETTYSBUR   | RG, PA 17325               |  |  |            |                              |                       | Form filed by Or<br>Form filed by Mo                          |                                  |              |  |  |
| (City)  | (State) (Zij               | <sup>p)</sup> Table 1                  | I - Non-Deriv                                | vative See | curities                     |                       | d, Disposed of,   | or Beneficial                    | ly Owned     |  |  |
| 1.Title of  | 2. Transaction Date        | 2A. Deemed                             | 3.   | 4. Securit | ies Acqu                     | uired 5               | 5. Amount of  | 6.                               | 7. Nature of |  |  |
| Security  | (Month/Day/Year)           | Execution Date, if                     | on Date, if Transaction(A) or Disposed of (D |            |                              |                       | Securities  | Ownership                        | Indirect     |  |  |
| (Instr. 3)  |                            | Code (Instr. 3, 4 and 5)<br>(Instr. 8) |  |            |                              | Beneficially<br>Dwned |   | Beneficial<br>Ownership          |              |  |  |
|   |                            | (Month/Day/Year)                       | (1130.0)                                     |            |                              |                       | Following   | or Indirect                      | (Instr. 4)   |  |  |
|   |                            |  |  |            | (A)                          |                       | Reported  | (I)                              |              |  |  |
|   |                            |  |  |            | or                           | (                     | Fransaction(s)<br>Instr. 3 and 4)                             | (Instr. 4)                       |              |  |  |
| ACNID   |                            |  | Code V                                       | Amount     | (D)                          | Price                 |   |                                  |              |  |  |
| ACNB<br>Corporation<br>Common                           | 03/08/2011                 |  | P  | 100        | A <sup>\$</sup> <sub>1</sub> | 8<br>15.57            | 4,552   | 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)

| 1. Title of<br>Derivativ<br>Security<br>(Instr. 3) | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, | Number Expiration Date<br>of (Month/Day/Ye<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed |                    | Amount of | Derivative<br>Security<br>(Instr. 5)   | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |  |
|--|---|---------------------------------------|--|--|--------------------|-----------|--|--|--|
|  |   | Code V                                | 4, and 5)<br>(A) (D)   | Date<br>Exercisable  | Expiration<br>Date | Title     | Amount<br>or<br>Number<br>of<br>Shares |  |  |

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## **Reporting Owners**

| Reporting Owner Name / Address                                    | Relationships |            |         |       |  |  |  |
|---|---------------|------------|---------|-------|--|--|--|
|   | Director      | 10% Owner  | Officer | Other |  |  |  |
| Williams James Eugene<br>325 BELMONT ROAD<br>GETTYSBURG, PA 17325 | Х             |            |         |       |  |  |  |
| Signatures  |               |            |         |       |  |  |  |
| /s/ Lynda L. Glass as POA Jam<br>Williams                         | e             | 03/08/2011 |         |       |  |  |  |
| **Signature of Reporting Pe                                       |               | 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.