First Savings Financial Group Inc Form 4

August 05, 2016

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

Check this box

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

See Instruction

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* Timberlake Vaughn K

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)

501 EAST LEWIS & CLARK

(First)

(State)

(Middle)

3. Date of Earliest Transaction

(Month/Day/Year) 08/03/2016

Filed(Month/Day/Year)

\_X\_\_ Director 10% Owner Other (specify Officer (give title

**PARKWAY** 

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

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

Person

CLARKSVILLE, IN 47129

(City)	(State)	(Zip) Tabl	le I - Non-l	Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	omr Dispo	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  (A) or		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)
Common Stock	08/03/2016		Code V S	Amount 326	(D) D	Price \$ 35.0001	(Instr. 3 and 4) 343	D	
Common Stock	08/04/2016		S	174	D	\$ 35.0001	169	D	
Common Stock							1,500	I	By IRA

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

**SEC 1474** 

(9-02)

#### Edgar Filing: First Savings Financial Group Inc - Form 4

## displays a currently valid OMB control

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transactio	5. Mumber	6. Date Exercisab Expiration Date	le and	7. Title and A Underlying S		1
Security (Instr. 3)	or Exercise Price of	(Mondin Day, Tear)	any (Month/Day/Year)	Code (Instr. 8)	of Derivative	(Month/Day/Year	)	(Instr. 3 and		(
,	Derivative Security		` ,	` '	Securities Acquired					ĺ
	•				(A) or Disposed					
					of (D) (Instr. 3,					
					4, and 5)				Amount	
						Date Exercisable	Expiration Date	Title	or Number of	
				Code V	(A) (D)				Shares	
Incentive Stock Options	\$ 13.25					05/18/2011(1)	05/18/2020	Common Stock	4,486	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
-111 X71 X7						

Timberlake Vaughn K 501 EAST LEWIS & CLARK PARKWAY X CLARKSVILLE, IN 47129

## **Signatures**

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

08/05/2016

Deletionships

\*\*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) Stock Options are fully vested.

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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