#### Edgar Filing: PURKRABEK KNUST SUSAN L - Form 4

|  | Luga  | r inng. r O   |  |           | 51 0   |                        |  |  |                                      |  |  |
|--|---|---|--|-----------|--|------------------------|--|--|--------------------------------------|--|--|
| PURKRABE<br>Form 4<br>May 24, 2018   | K KNUST SUSAN L<br>3  |   |  |           |  |                        |  |  |                                      |  |  |
| FORM   | 4   |   |  |           |  |                        |  |  | PPROVAL                              |  |  |
|  | UNITED STAT   |   |  |           |  |                        |  | OMB<br>Number:   | 3235-0287                            |  |  |
| Check thi<br>if no long  | er  | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES                               |  |           |  |                        |  |  | January 31,<br>2005                  |  |  |
| subject to<br>Section 10<br>Form 4 or  | 51AIEMENI<br>6.   |   |  |           |  |                        |  |  | average<br>Irs per                   |  |  |
|  | rm 5<br>ligations<br>by continue.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<br>30(h) of the Investment Company Act of 1940 |   |  |           |  |                        |  |  |                                      |  |  |
| (Print or Type R   | esponses)   |   |  |           |  |                        |  |  |                                      |  |  |
| 1. Name and Address of Reporting Person       2. Issuer         PURKRABEK KNUST SUSAN L       Symbol         |   |   | r Name <b>and</b> Ticker or Trading        |           |  |                        | 5. Relationship of Reporting Person(s) to Issuer   |  |                                      |  |  |
|  | FIRST<br>/OH/ [F  | FINANCI<br>FFBC]  | IAL BAN                                    | ICOF      | RP   | (Check all applicable) |  |  |                                      |  |  |
| (Last)   | Last) (First) (Middle) 3. Date of Ear<br>(Month/Day/  |   |  | ansaction |  |                        | _X_ Director10% Owner<br>Officer (give titleOther (specify<br>below)   |  |                                      |  |  |
| 255 EAST FIFTH STREET, SUITE05/22/2018below)below)2900   |   |   |  |           |  |                        |  |  |                                      |  |  |
|  |   |   | mendment, Date Original<br>Aonth/Day/Year) |           |  |                        | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |  |                                      |  |  |
| CINCINNA   | TI, OH 45202  |   |  |           |  |                        | Person   | Note than one R  | cporting                             |  |  |
| (City) (State) (Zip) <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b> |   |   |  |           |  |                        |  | lly Owned  |                                      |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | (Month/Day/Year) Exe<br>any   | Transaction Date 2A. Deemed<br>onth/Day/Year) Execution Date, if<br>any<br>(Month/Day/Year) |  |           | ties<br>l (A) o<br>l of (D<br>4 and<br>(A)<br>or | )                      | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |                                      |  |  |
| C  |   |   | Code V                                     | Amount    | (D)  | Price                  | (Instr. 3 and 4)   |  |                                      |  |  |
| Common<br>Stock  | 05/22/2018  |   | А  | 1,548     | А  | \$0                    | 32,912.5454  | D  |                                      |  |  |
| Common<br>Stock<br>(Susan<br>Knust FFB<br>Trust)   |   |   |  |           |  |                        | 3,000  | I  | by Susan<br>Knust FFB<br>Trust       |  |  |
| Common<br>Stock<br>(Susan<br>Knust   |   |   |  |           |  |                        | 525  | I  | by Susan<br>Knust<br>Agency<br>Trust |  |  |

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| Agency<br>Trust)  |       |   |   |
|---|-------|---|---|
| Common<br>Stock<br>(David<br>Knust FFB<br>Trust)                  | 3,000 | I | by David<br>Knust FFB<br>Trust                    |
| Common<br>Stock<br>(David &<br>Susan<br>Knust<br>Living<br>Trust) | 2,000 | I | By David<br>and Susan<br>Knust<br>Living<br>Trust |

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 | 2.          | 3. Transaction Date |                    | 4.         | 5.         | 6. Date Exer | cisable and | 7. Tit | le and     | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|--------------|-------------|--------|------------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | onNumber   | Expiration D | ate         | Amou   | unt of     | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/  | /Year)      | Unde   | rlying     | Security    | Secu   |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e            |             | Secur  | rities     | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |              |             | (Instr | . 3 and 4) |             | Owne   |
|             | Security    |                     |                    |            | Acquired   |              |             |        |            |             | Follo  |
|             |             |                     |                    |            | (A) or     |              |             |        |            |             | Repo   |
|             |             |                     |                    |            | Disposed   |              |             |        |            |             | Trans  |
|             |             |                     |                    |            | of (D)     |              |             |        |            |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |              |             |        |            |             | (      |
|             |             |                     |                    |            | 4, and 5)  |              |             |        |            |             |        |
|             |             |                     |                    |            | i, una 5)  |              |             |        |            |             |        |
|             |             |                     |                    |            |            |              |             |        | Amount     |             |        |
|             |             |                     |                    |            |            | Data         | Evaluation  |        | or         |             |        |
|             |             |                     |                    |            |            | Date         | Expiration  | Title  | Number     |             |        |
|             |             |                     |                    |            |            | Exercisable  | Date        |        | of         |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |              |             |        | Shares     |             |        |
|             |             |                     |                    |            |            |              |             |        |            |             |        |

Relationships

Х

10% Owner Officer Other

### **Reporting Owners**

| Reporting Owner Name / Address |          |
|--------------------------------|----------|
|                                | Director |
|                                |          |

PURKRABEK KNUST SUSAN L 255 EAST FIFTH STREET SUITE 2900 CINCINNATI, OH 45202

# Signatures

/s/ Billie L. Meents, POA

05/24/2018

\*\*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.