**BESSE DAWN A** Form 4 May 11, 2009

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

2 Jasuar Nama and Tiakar or Trading

OMB

3235-0287 Number:

**OMB APPROVAL** 

January 31, Expires: 2005

0.5

Estimated average burden hours per

5 Relationship of Reporting Person(s) to

response...

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

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

05/08/2009

Stock

BESSE DAV	Symbol CITIZE	2. Issuer Name and Ticker or Trading Symbol CITIZENS & NORTHERN CORP [CZNC]					Issuer (Check all applicable)			
(Last) 726 FISCHI	(First) (M	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 05/07/2009				Director 10% Owner Security Officer (give title Other (specify below)  Executive Vice President			
WELLSBOI		endment, Da nth/Day/Year	U	1		6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by N Person	-	rson		
(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. Transactic Code (Instr. 8)	Pransaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Instr. 8)  (A) or		ed of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4)		
Common Stock	05/07/2009	05/11/2009	S	300	D	\$ 18.1	4,457 <u>(1)</u>	D		
Commom	05/08/2009	05/11/2009	S	250	D	\$	4 207 (1)	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

S

250

05/11/2009

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

 $4,207 \frac{(1)}{2}$ 

D

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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	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security	Acquired								Follo	
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	1	Title	Number		
						LACICISADIC			of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Director 10% Owner Other

**BESSE DAWN A** Executive 726 FISCHLER STREET EXT Vice WELLSBORO, PA 16901 President

## **Signatures**

Jessica R. Brown for Dawn A. Besse under Power of Attorney dated 8/23/07

05/11/2009

\*\*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) Total Holdings including Retirement Plan shares, but not Restricted Stock

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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