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CITIZENS & Form 4 March 03, 20	2 NORTHERN C	ORP										
FORM 4 UNITED STATES SECURITIES AND EX Washington, D.C. 2										OMB AF OMB Number:	PROVAL 3235-0287	
Check this box Expires: Januar												
(Print or Type R	Responses)											
SCOVILL J BRADLEY Symbol				r Name and Ticker or Trading ENS & NORTHERN CORP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				of Earliest Transaction Day/Year) 2015					Director 10% Owner X Officer (give title Other (specify below) below) President & CEO			
				nendment, Date Original Ionth/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)		(Zip)	Tabl	e I - Non-	-De	erivative	Securi	ities Aca	Person uired, Disposed of,	or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ned	3.	tior)	4. Securit n(A) or Di (Instr. 3, -	ties Ac sposed	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock	03/02/2015			A <u>(1)</u>		5,174	А	\$ 19.33	5,174	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	2.	3. Transaction Date		4.	5.	6. Date Exer			le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio		Expiration D			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		(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)						
									Amount		
						5	.		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
					,						
_											
Repo	r tina O	wners									

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J

Reporting Owner Name / Address		Re							
I State and a state	Director	10% Owner	Officer	Other					
SCOVILL J BRADLEY 3222 SHELLERS BEND #202 STATE COLLEGE, PA 16801			President & CEO						
Signatures									
Teresa L. Mitchell for J. Bradley 02/26/15.	03/03/2015								
<u>**</u> Sign		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) Award of 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.