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CSB BANC Form 4	ORP INC /OH										
September 0	2, 2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549							N OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 o Form 5	ger STATEM 6. r			Estimate burden h response	Expires: January 31, 2005 Estimated average burden hours per response 0.5						
obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the	Public Ut		ling Con	npan	y Act	age Act of 1934 of 1935 or Sect 940			
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> MEILER PAULA J			2. Issuer Name and Ticker or Trading Symbol CSB BANCORP INC /OH [CSBB]					5. Relationship of Reporting Person(s) to Issuer			
(Last)						-	-	(Check all applicable)			
91 N. CLAY ST.			(Month/Day/Year) 08/31/2015					Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MILLERSB	BURG, OH 44654							Form filed by Person	y More than One	Reporting	
(City)	(State) ((Zip)	Tabl	e I - Non-D	erivative	Secur	ities A	cquired, Disposed	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any		3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	08/31/2015			W	100	A	\$ 0 (1)	1,411.9878 (2)	D		
Common Stock								3,800	Ι	IRA	
Common Stock								9,780.262 <u>(2)</u>	I	By Retirement Plan	

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

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information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Dat (Month/Day/Year)		Code	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		te	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. P Der Sec (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (Right to Buy)	\$ 18					03/31/2008	03/31/2015	Common Stock	5,952	
Employee Stock Option (Right to Buy)	\$ 18					03/31/2009	03/31/2016	Common Stock	5,952	
Reporting Owners										
Reporting O	wner Name /	Address	Re	lationships						
		Director	10% Owner	Officer		Other				

MEILER PAULA J 91 N. CLAY ST. MILLERSBURG, OH 44654

Senior Vice President

Signatures

Paula J. Meiler by Margaret L. Conn, Attorney-in-Fact pursuant to Power of Attorney filed	09/01/2015
herewith	09/01/2015

**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) This transaction represents a transfer of shares and not a purchase from the reporting Person's parental estate.

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(2) Allocated to the reporting person's account pursuant to a dividend reinvestment feature of the CSB Bancorp, Inc. Dividend Reinvestment Plan.

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.