#### AMERISERV FINANCIAL INC /PA/

Form 4 April 24, 2017

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

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response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

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).

obligations

may continue.

(Print or Type Responses)

| 1. Name and Address of Reporting Person * WISE ROBERT L |                                      |   |   | 5. Relationship of Reporting Person(s) to<br>Issuer  (Check all applicable)   |  |  |  |
|---|--------------------------------------|---|---|---|--|--|--|
| (Last)  | (First)                              | (Mor  | te of Earliest Transaction<br>th/Day/Year)<br>7/2017                | X Director 10% Owner Officer (give title Other (specify below)  |  |  |  |
|   | (Street)                             |   | (Month/Day/Year)  | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person   |  |  |  |
| PA  |                                      |   |   | Form filed by More than One Reporting Person  |  |  |  |
| (City)  | (State)                              | (Zip)   | <b>Γable I - Non-Derivative Securities Acqu</b>                     | ired, Disposed of, or Beneficially Owned  |  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)                    | 2. Transaction Date (Month/Day/Year) | 2A. Deemed<br>Execution Date, i<br>any<br>(Month/Day/Year | Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D) Price | or 5. Amount of Securities Ownership of Indirect Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect (Instr. 4) Transaction(s) (Instr. 4) (Instr. 3 and 4) |  |  |  |
| Common<br>Stock   | 04/17/2017                           | 04/20/2017  | P 176.3632 A \$ 3.9189  | 131,718.2567 D  |  |  |  |

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

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.

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

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.  onNumber of Derivative Securities Acquired (A) or Disposed of (D) |                     | ate                | 7. Title a<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 a | of<br>ng<br>s | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Own<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|--------------------------------------|---|--|---|---------------------|--------------------|--|---------------|---|--|
|   |   |                                      |   | Code V                                 | (Instr. 3, 4, and 5)  (A) (D)   | Date<br>Exercisable | Expiration<br>Date | or<br>Title Nu<br>of   | umber         |   |  |

# **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |         |       |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|
|                                | Director      | 10% Owner | Officer | Other |  |  |
| WISE ROBERT L                  |               |           |         |       |  |  |
|                                | X             |           |         |       |  |  |
| DΛ                             |               |           |         |       |  |  |

# **Signatures**

Sharon M. Callihan, Attorney-in-Fact

\*\*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.

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