## Edgar Filing: FNB CORP/FL/ - Form 4

FNB CORP/	/FL/										
Form 4 May 19, 201	6										
FORM									OMB AF	PROVAL	
	UNITE	D STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box				ANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: Estimated a burden hour response	•	
Form 5 obligatio may cont <i>See</i> Instru 1(b).	tinue. Section 1	7(a) of the	Public U		ding Con	npany	Act of	e Act of 1934, E 1935 or Section 40			
(Print or Type I	Responses)										
			Symbol	<ol> <li>Issuer Name and Ticker or Trading Symbol</li> <li>FNB CORP/FL/ [FNB]</li> <li>Date of Earliest Transaction</li> </ol>				5. Relationship of Reporting Person(s) to Issuer			
(Last)								(Check all applicable)			
	TH SHORE CE	. ,	(Month/D 05/18/2)	ay/Year)	ansaction			XDirector Officer (give below)		Owner r (specify	
				Amendment, Date Original (Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PITTSBUR	GH, PA 15212							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	med n Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	isposed	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
G				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	05/18/2016			А	3,100	А	\$ 12.96	780,428	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)

## Edgar Filing: FNB CORP/FL/ - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	onNumber Expiration of (Month/I			7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

		Relationships						
Reporting Owner Name / A	ddress	Director	10% Owner	Officer	Other			
NALBANDIAN GARY L ONE NORTH SHORE CE 12 FEDERAL STREET PITTSBURGH, PA 15212	ENTER	Х						
Signatures								
/s/Gary L. Nalbandian	05/19/20	)16						
**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.