FNB CORP/FL/ Form 4 August 03, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number: January 31,

2005 Estimated average burden hours per

Expires:

response... 0.5

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

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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

See Instruction

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading HORMELL ROBERT A Issuer Symbol FNB CORP/FL/ [FNB] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) X_ Director 10% Owner _Other (specify Officer (give title ONE NORTH SHORE CENTER 07/29/2016 below) (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting PITTSBURGH, PA 15212 Person

| (City) | (State) | (Zip) Table | e I - Non-D | erivative Securities Acq | uired, Disposed of | or Beneficiall | y Owned |
|------------|---------------------|--------------------|-------------|--------------------------|--------------------|----------------|--------------|
| 1.Title of | 2. Transaction Date | 2A. Deemed | 3. | 4. Securities Acquired | 5. Amount of | 6. | 7. Nature of |
| Security | (Month/Day/Year) | Execution Date, if | Transactio | n(A) or Disposed of (D) | Securities | Ownership | Indirect |
| (Instr. 3) | | any | Code | (Instr. 3, 4 and 5) | Beneficially | Form: Direct | Beneficial |
| | | (Month/Day/Year) | (Instr. 8) | | Owned | (D) or | Ownership |
| | | | | | Following | Indirect (I) | (Instr. 4) |
| | | | | (A) | Reported | (Instr. 4) | |
| | | | | (A) | Transaction(s) | | |

(Instr. 3 and 4) Code V Amount (D) Price Common 07/29/2016 P 3,000 51,217.1172 11.94 Stock

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)

Edgar Filing: FNB CORP/FL/ - Form 4

| 1. Title of | 2. | 3. Transaction Date (Month/Day/Year) | | 4. | 5. | 6. Date Exercises Date Expiration Da | | 7. Title and Amount of | 8. Price of | 9. Nu Derix |
|--------------------------------------|---|--------------------------------------|---|---------------------------------|--|--------------------------------------|--------------------|--|--------------------------------------|--|
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Monun Day/Year) | execution Date, if any (Month/Day/Year) | Transacti Code (Instr. 8) | orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 5 | nth/Day/Year) | Underlying Securities (Instr. 3 and 4) | Derivative Security (Instr. 5) | Deriv Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | , , | | Expiration Date | Title Amount or Number of | | |

Reporting Owners

Relationships

Reporting Owner Name / Address

Director 10% Owner Officer Other

HORMELL ROBERT A
ONE NORTH SHORE CENTER X
PITTSBURGH, PA 15212

Signatures

/s/Robert A. 08/03/2016 Hormell

**Signature of Date
Reporting Person

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.

Reporting Owners 2