#### Edgar Filing: CITIZENS FINANCIAL CORP /KY/ - Form 4

CITIZENS FINANCIAL CORP /KY/ Form 4 November 13, 2007 FORM 4

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

Check this box

if no longer

Section 16.

Form 4 or

Form 5

1(b).

subject to

1. Name and Address of Reporting Person <u>*</u> CORNETT JOHN D			ting Person <u>*</u>	2. Issuer Name and Ticker or Trading Symbol CITIZENS FINANCIAL CORP	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(Last)	(First)	(Middle)	/KY/ [CNFL] 3. Date of Earliest Transaction	Director 10% Owner			
12910 SHELBYVILLE ROAD, SUITE 300		(ivitable)	(Month/Day/Year) 11/13/2007	Officer (give title Other (specify below) below) Executive VP and COO				
	(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
	LOUISVILI	LE, KY 4024.	3	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
	(City)	(State)	(Zip)	Table I - Non-Derivative Securities A	cquired, Disposed of, or Beneficially Owned			
	1.Title of	2. Transaction	Date 2A. De	emed 3. 4. Securities Acquired	d 5. Amount of 6. Ownership 7. Nature of			

2. Transaction Date	2A. Deemed	3.	4. Securit	ies Acquire	1 5. Amount of	6. Ownership	7. Nature of
(Month/Day/Year)	Execution Date, if	Transactio	n(A) or Di	sposed of	Securities	Form: Direct	Indirect
	any	Code	(D)		Beneficially	(D) or	Beneficial
	(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4	4 and 5)	Owned	Indirect (I)	Ownership
					Following	(Instr. 4)	(Instr. 4)
				$(\mathbf{A})$	Reported		
					Transaction(s)		
		Code V	Amount		(Instr. 3 and 4)		
				<b></b>			
11/13/2007		Р	7,800	A \$ 6.53	20,643	D	
	(Month/Day/Year)	(Month/Day/Year)	(Month/Day/Year) Execution Date, if Transaction any Code (Month/Day/Year) (Instr. 8) Code V	(Month/Day/Year) Execution Date, if any Code (D) (Month/Day/Year) (Instr. 8) (Instr. 3, - Code V Amount	(Month/Day/Year) Execution Date, if Transaction(A) or Disposed of any Code (D) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	(Month/Day/Year)Execution Date, if any (Month/Day/Year)Transaction(A) or Disposed of CodeSecurities Beneficially Owned Following Reported Transaction(s) (Instr. 3, 4 and 5)(Month/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)Owned Following (A) or (Instr. 3 and 4)	(Month/Day/Year) Execution Date, if Transaction(A) or Disposed of any Code (D) Beneficially (D) or (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Indirect (I) Following (Instr. 4) (A) ransaction(s) or Code V Amount (D) Price (S)

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)

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CORNETT JOHN D 12910 SHELBYVILLE ROAD SUITE 300 LOUISVILLE, KY 40243			Executive VF	P and COO			
Signatures							
/s/ Aaron D. Zibart, by Power of Attorney	of 11/13/2007						
**Signature of Reporting Person		Date					
Explanation of Por	none	000					

## 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.