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HARLEYSVILLE SAVINGS FINANCIAL CORP

Form 4

January 19, 2007

FORM 4

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

OMB Number:

3235-0287

0.5

Check this box if no longer

subject to Section 16. Form 4 or

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

January 31, Expires: 2005

OMB APPROVAL

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Form 5 obligations may continue.

See Instruction

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

1(b).

(City)

(State)

(Zip)

(Print or Type Responses)

| 1. Name and Ad FRIESEN D | • | orting Person * | 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer | | |
|-----------------------------|----------|-----------------|--|---|--|--|
| | | | HARLEYSVILLE SAVINGS FINANCIAL CORP [HARL] | (Check all applicable) | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | X Director 10% Owner | | |
| 485 QUARRY RD | | | (Month/Day/Year) 01/19/2007 | Officer (give title Other (specify below) | | |
| F | | | 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 | | |
| HARLEYSV | ILLE, PA | 19438 | | Person | | |

| (City) | (State) | Tabl | le I - Non-I | Jerivative | Secu | rities Acqu | ired, Disposed of | , or Beneficiall | y Owned |
|------------------------|--------------------------------------|-------------------------------|------------------|-------------------------|-----------|--------------|-------------------------|------------------------|-----------------------|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. Transactio | 4. Securi on(A) or D | | • | 5. Amount of Securities | 6. Ownership | 7. Nature of Indirect |
| (Instr. 3) | | any | Code | (Instr. 3, | 4 and | 5) | Beneficially | Form: Direct | |
| | | (Month/Day/Year) | (Instr. 8) | | | | Owned Following | (D) or Indirect (I) | Ownership (Instr. 4) |
| | | | | | | | Reported | (Instr. 4) | (111511. 4) |
| | | | | | (A) | | Transaction(s) | (1110417-1) | |
| | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | |
| Common | 01/19/2007 | | D | 333 | D | \$ 17.243 | 15,144 | I | IRA For Person |
| Common | 12/14/2006 | | G | 1,842 | D | \$0 | 16,246 | D (1) | |
| Common | | | | | | | 6,940 | D (2) | |
| Common | | | | | | | 7,917 | D (3) | |

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

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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 Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. 6. Date Exercisable Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | e | 7. Title and A Underlying S (Instr. 3 and | ~ | |
|---|---|---|---|---------------------------------------|---|---------------------|-----------------|---|--|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Right to Buy Common Option | \$ 18 | 01/25/2006 | | J | 0 | 01/26/2011 | 01/26/2016 | Common | 3,000 | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| FRIESEN DAVID J | | | | | | | |
| 485 QUARRY RD | X | | | | | | |
| HARLEYSVILLE, PA 19438 | | | | | | | |

Signatures

/s/ Brendan J. McGill, POA for David J.

Friesen 01/19/2007

**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) Jointly With Spouse
- (2) Spouse Individually
- (3) Individually

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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