Edgar Filing: Gray Peter A - Form 4

Gray Peter A Form 4 October 02, 2018 FORM4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue, see Instruction 1(b). OMB APPROVAL Filed pursuant to Section 16(a) of the Securities Exchange Act of 1935, 30(h) of the Investment Company Act of 1940 1(b). OMB APPROVAL									3235-0287 January 31, 2005 average	
(Print or Type]	Responses)									
1. Name and Address of Reporting Person <u></u> Gray Peter A			2. Issuer Name and Ticker or Trading Symbol ESSA Bancorp, Inc. [ESSA]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M		3. Date of Earliest Transaction				(Check all applicable)			
200 PALMI		(Month/Day/Year) 09/30/2018				Director 10% Owner X Officer (give title Other (specify below) EVP/Dir. Strategic Initiatives				
STROUDS	(Street) BURG, PA 18360	Filed(M	4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State) ((Zip) Ta	ble I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	09/30/2018		Code V F	Amount 252	(D) D	Price \$	4,952 (2) (3)	D		
Stock Common Stock	10/01/2018		А	3,077 (4)	A	16.26 \$ 0	8,029 (2) (3)	D		
Common Stock							1,000	Ι	By IRA	
Common Stock							354 <u>(1)</u>	Ι	By 401(k)	

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	'Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	T . 1	or		
						Exercisable	Date	Title	Number		
					(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
r o	Director	10% Owner	Officer	Other			
Gray Peter A 200 PALMER STREET STROUDSBURG, PA 18360			EVP/Dir. Strategic Initiatives				

Signatures

/s/ Marc P. Levy, pursuant to power of attorney

<u>**</u>Signature of Reporting Person

10/02/2018 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) Reflects transactions not required to be reported pursuant to Section 16 of the Securities Exchange Act of 1934, as amended.
- (2) Includes shares of restricted stock which vest 324 shares on each of September 30, 2017, 2018, 2019 and 2020, and 1,000 shares on each of March 29, 2018 and 2019.
- (3) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2018.
- (4) Shares of restricted stock vest at a rate of 25% per year commencing on September 30, 2019.

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.