McCracken . Form 5 January 29, 2									
FORM	15				OMB AI	PPROVAL			
Check this	UNIT	TED STATES	S SECURITIES AND EXCHANGE Washington, D.C. 20549	OMB Number:	3235-0362				
no longer	subject		washington, D.C. 20349	Expires:	January 31, 2005				
to Section Form 4 or 5 obligation may contin	Form Pons nue.	ANNUAL ST	TATEMENT OF CHANGES IN BEI OWNERSHIP OF SECURITIES	Estimated a burden hou response	average irs per				
See InstructionFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934,1(b).Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or SectionReported30(h) of the Investment Company Act of 1940TransactionsReported									
1. Name and Address of Reporting Person <u>*</u> McCracken Janice S			2. Issuer Name and Ticker or Trading Symbol QNB CORP [QNBC]	5. Relationship of Issuer					
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)12/31/2018	(Check all applicable) ded					
P. O. BOX	2005			,	,				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Reporting					
				(check	applicable line))			

QUAKERTOWN, PAÂ 18951

X Form Filed by One Reporting Person ____ Form Filed by More than One Reporting Person

(City)	(State)	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or B							y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed3.Execution Date, if anyTransaction Code(Month/Day/Year)(Instr. 8)		4. Securitie or Disposed (Instr. 3, 4	d of (Ê))	5. Amount of Securities6.BeneficiallyForm:Owned at endDirect (D)of Issuer'sor IndirectFiscal Year(I)(Instr. 3 and 4)(Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	04/02/2018	Â	P <u>(1)</u>	10.1252	A	\$ 42.42	2,071.3641	D	Â
Common Stock	05/31/2018	Â	P <u>(2)</u>	92	А	\$ 39.6	2,071.3641	D	Â
Common Stock	06/29/2018	Â	P <u>(1)</u>	10.4191	А	\$ 44.36	2,071.3641	D	Â
Common Stock	09/28/2018	Â	P <u>(1)</u>	10.5824	А	\$ 43.99	2,071.3641	D	Â
Common Stock	11/30/2018	Â	P <u>(2)</u>	93	А	\$ 39.47	2,071.3641	D	Â

Common	12/28/2018	Â	P (1)	13.0235	А	\$	2 071 3641	D	Â
Stock	12/20/2010	Л	1	15.0255	А	38.29	2,071.3641	D	А

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 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. Transaction Code (Instr. 8)	Secu Acqu (A) o	vative urities uired or oosed O) r. 3,	(Month/Day/Year) ve es d		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock (Right to Buy)	\$ 29.25	Â	Â	Â	Â	Â	01/29/2018	01/29/2020	Common Stock	2,150
Common Stock (Right to Buy)	\$ 30.4	Â	Â	Â	Â	Â	02/15/2019	02/15/2021	Common Stock	3,500
Common Stock (Right to Buy)	\$ 37.6	Â	Â	Â	Â	Â	02/15/2020	02/15/2022	Common Stock	3,400
Common Stock (Right to Buy)	\$ 43.6	Â	Â	Â	Â	Â	02/20/2021	02/20/2023	Common Stock	3,375

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
McCracken Janice S P. O. BOX 9005	ÂX	Â	Â	Â				

SEC 2270

(9-02)

I 5 (QUAKERTOWN, PAÂ 18951

Signatures

Janice McCracken

01/29/2019

<u>**</u>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) Dividend Reinvestment Plan acquisition
- (2) Employee Stock Purchase Plan acquisition

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.