## OLSON CHRISTINE J

Form 5

February 12, 2010

redition 12	2, 2010										
FORM	<b>1</b> 5							OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMIS							IMISSION	OMB Number:	3235-0362		
Check the no longer		W	Washington, D.C. 20549 'ATEMENT OF CHANGES IN BENEFICIA' OWNERSHIP OF SECURITIES					Expires:	January 31, 2005		
to Section Form 4 o 5 obligati	r Form ANN ions							Estimated average burden hours per			
may cont See Instru	uction	wayant ta Caatiam						response	1.0		
1(b). Form 3 H Reported Form 4 Transacti Reported	Holdings Section 170			ing Comp	pany	Act of 193					
	Address of Reporting HRISTINE J	Symbo	2. Issuer Name and Ticker or Trading Symbol S&T BANCORP INC [STBA]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (			_	_	nded	(Check all applicable)				
` ,	ADELPHIA STRE	(Month 12/31	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2009				X Director 10% Owner Officer (give title Other (specify below)				
000 I IIILA	(Street)		mendment, Date	e Original		6. I	ndividual or Joi	nt/Group Repo	orting		
			Filed(Month/Day/Year)				(check applicable line)				
							(CHECK	applicable line)			
INDIANA,	PA 15701							d by One Reporting Person I by More than One Reporting			
(City)	(State)	tate) (Zip) Table I - Non-Derivative Securities Acquired, Dispos						d of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	4. Securi or Dispo (Instr. 3,	sed of 4 and (A)		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	12/31/2009	Â	J <u>(1)</u>	Amount	or (D)	Price \$ 18.1775	170	I	Christine J T/f Joseph		
Common Stock	12/31/2009	Â	J <u>(1)</u>	8	A	\$ 18.1775	165	I	Jack Christine J T/f Maxwell		

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35,173

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Maxwell Jack

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Common Stock

Pnc Invest Common To Â Â Â Â Â 109,730 I Stock Benefit Children Reminder: Report on a separate line for each class of Persons who respond to the collection of information **SEC 2270** securities beneficially owned directly or indirectly. contained in this form are not required to respond unless (9-02)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)	Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 II S ( (
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options (Right to Buy)	\$ 19.8125	Â	Â	Â	Â	Â	06/18/2001	12/18/2010	Common Stock	5,000	
Stock Options (Right to Buy)	\$ 24.4	Â	Â	Â	Â	Â	06/17/2002	12/17/2011	Common Stock	5,000	
Stock Options (Right to Buy)	\$ 26.6	Â	Â	Â	Â	Â	01/01/2004	12/16/2012	Common Stock	3,000	
Stock Options (Right to Buy)	\$ 29.965	Â	Â	Â	Â	Â	01/01/2005	12/15/2013	Common Stock	2,500	
Stock Options (Right to Buy)	\$ 37.08	Â	Â	Â	Â	Â	01/01/2006	12/20/2014	Common Stock	2,500	

Stock

Options (Right to Buy)

\[ \hat{A} \quad \hat{A} \quad \hat{A} \quad \hat{A} \quad \hat{A} \quad \hat{O1/01/2007} \quad \frac{12/19/2015}{Stock} \quad \frac{Common}{Stock} \quad 2,500 \]

## **Reporting Owners**

Reporting Owner Name / Address Director 10% Owner Officer Other

OLSON CHRISTINE J
800 PHILADELPHIA STREET X INDIANA, PAÂ 15701

## **Signatures**

/s/ Wendy S. Bell P.O.A. for Christine J. Toretti

02/11/2010

\*\*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) Increase due to reinvested dividends in a dividend reinvestment plan.

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.

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