SECURITIES AND EXCHANGE COMMISSION
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JAN 2 9 2003
DIVISION OF MARKET REGULATION

File Number: 85-10279
For the reporting period ended December 31, 2002

03001132

OMB APPROVAL	
OMB Number:	3235-0337
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Estimated average burden hours per minimum response..................	.50

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

FORM TA-2

FORM FOR REPORTING ACTIVITIES OF TRANSFER AGENTS REGISTERED PURSUANT TO SECTION 17A OF THE SECURITIES EXCHANGE ACT OF 1934

ATTENTION: INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACT CONSTITUTE FEDERAL CRIMINAL VIOLATIONS. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a)

1. Full name of Registrant as stated in Question 3 of Form TA-1:
(Do not use Form TA-2 to change name or address.)

The Mahoning National Bank of Youngstown

2. a. During the reporting period, has the Registrant engaged a service company to perform any of its transfer agent functions? (Check appropriate box.)

☐ All ☐ Some ☐ None

b. If the answer to subsection (a) is all or some, provide the name(s) and transfer agent file number(s) of all service company(ies) engaged:

Name of Transfer Agent(s):	File No. (beginning with 84- or 85-):
	PROCESSED
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c. During the reporting period, has the Registrant been engaged as a service company by a named transfer agent to perform transfer agent functions?

☐ Yes ☐ No

d. If the answer to subsection (c) is yes, provide the name(s) and file number(s) of the named transfer agent(s) for which the Registrant has been engaged as a service company to perform transfer agent functions: (If more room is required, please complete and attach the Supplement to Form TA-2.)

Name of Transfer Agent(s):	File No. (beginning with 84- or 85-):

0024

SEC 2113 (12-00)

3. a. Registrant's appropriate regulatory agency (ARA): (Check one box only.)
   - ☐ Comptroller of the Currency
   - ☐ Federal Deposit Insurance Corporation
   - ☐ Board of Governors of the Federal Reserve System
   - ☐ Securities and Exchange Commission

   b. During the reporting period, has the Registrant amended Form TA-1 within 60 calendar days following the date on which information reported therein became inaccurate, incomplete, or misleading? (Check appropriate box.)

   - ☐ Yes, filed amendment(s)
   - ☐ No, failed to file amendment(s)
   - ☐ Not applicable

   c. If the answer to subsection (b) is no, provide an explanation:

____

____

____

____

If the response to any of questions 4-11 below is none or zero, enter "0."

4. Number of items received for transfer during the reporting period: .... ____________

5. a. Total number of individual securityholder accounts, including accounts in the Direct Registration System (DRS), dividend reinvestment plans and/or direct purchase plans as of December 31: .... ____________

   b. Number of individual securityholder dividend reinvestment plan and/or direct purchase plan accounts as of December 31: .... ____________

   c. Number of individual securityholder DRS accounts as of December 31: .... ____________

   d. Approximate percentage of individual securityholder accounts from subsection (a) in the following categories as of December 31:

Corporate Equity Securities	Corporate Debt Securities	Open-End Investment Company Securities	Limited Partnership Securities	Municipal Debt Securities	Other Securities

6. Number of securities issues for which Registrant acted in the following capacities, as of December 31:

	Corporate Securities		Open-End Investment Company Securities	Limited Partnership Securities	Municipal Debt Securities	Other Securities
	Equity	Debt				
a. Receives items for transfer and maintains the master securityholder files:						
b. Receives items for transfer but does not maintain the master securityholder files:						
c. Does not receive items for transfer but maintains the master securityholder files:						

7. Scope of certain additional types of activities performed:
   a. Number of issues for which dividend reinvestment plan and/or direct purchase plan services were provided, as of December 31: .... __________
   b. Number of issues for which DRS services were provided, as of December 31: .... __________
   c. Dividend disbursement and interest paying agent activities conducted during the reporting period:
      i. number of issues .... __________
      ii. amount (in dollars) .... __________

8. a. Number and aggregate market value of securities aged record differences, existing for more than 30 days, as of December 31:

	Prior Transfer Agent(s) (If applicable)	Current Transfer Agent
i. Number of issues		
ii. Market value (in dollars)		

   b. Number of quarterly reports regarding buy-ins filed by the Registrant with its ARA (including the SEC) during the reporting period pursuant to Rule 17Ad-11(c)(2): .... __________

   c. During the reporting period, did the Registrant file all quarterly reports regarding buy-ins with its ARA (including the SEC) required by Rule 17Ad-11(c)(2)?

☐ Yes ☐ No

   d. If the answers to subsection (c) is no, provide an explanation for each failure to file:

____
____
____
____

9. a. During the reporting period, has the Registrant always been in compliance with the turnaround time for routine items as set forth in Rule 17Ad-2?

☐ Yes ☐ No

If the answer to subsection (a) is no, complete subsections (i) through (ii).

   i. Provide the number of months during the reporting period in which the Registrant was **not** in compliance with the turnaround time for routine items according to Rule 17Ad-2. .... __________

   ii. Provide the number of written notices Registrant filed during the reporting period with the SEC and with its ARA that reported its noncompliance with turnaround time for routine items according to Rule 17Ad-2. .... __________

10. Number of open-end investment company securities purchases and redemptions (transactions) excluding dividend, interest and distribution postings, and address changes processed during the reporting period:
   a. Total number of transactions processed: .... __________
   b. Number of transactions processed on a date other than date of receipt of order (as ofs): .... __________

11. a. During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search

b. Number of lost securityholder accounts that have been remitted to states during the reporting period: .... ________

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form: Edward J. Tognetti	Title: SVP + Chief Fiduciary Officer Sky Trust, N.A. Telephone number: 216 378-6275
Name of Official responsible for Form: (First name, Middle name, Last name) Edward J. Tognetti	Date signed (Month/Day/Year): 1/23/03

File Number	Supplement to Form TA-2
For the reporting period ended December 31,_____	Full Name of Registrant

Use this schedule to provide the name(s) and file number(s) of the named transfer agent(s) for which the Registrant has been engaged as a service company to perform transfer agent functions:

Name(s):	File No. (beginning with 84- or 85-):

Sky Trust

SECURITIES AND EXCHANGE COMMISSION
RECEIVED

JAN 2 9 2003

DIVISION OF MARKET REGULATION

January 23, 2003

United States Securities and Exchange Commission
Washington, D.C. 20549
Attention: Jerry W. Carpenter, Assistant Director

Re: TA-2 for The Mahoning National Bank of Youngstown for period ending 12/31/02

Dear Assistant Director Carpenter:

Enclosed is Form TA-2 for the Mahoning National Bank of Youngstown for the period ending 12/31/02 which I have executed. Please be advised that I have not filled in any of the requested information based upon the fact that on January 18, 2003, I completed and mailed a Request for Deregistration (copy attached).

Please contact me at (216) 378-6275 if there is another process which I should follow. Thank you in advance for your time and assistance.

Sincerely,

Edward J. Tognetti
Senior Vice President &
Chief Fiduciary Officer

Enc.

30050 Chagrin Boulevard
Suite 150
Pepper Pike, Ohio 44124
Phone: (888) 312-6278
Phone: (216) 378-2810
Fax: (216) 378-2832

OMB No. 3064-0027
Expiration Date: 8/31/05

COPY

REQUEST FOR DEREGISTRATION
REGISTERED TRANSFER AGENT

DISCLOSURE OF ESTIMATED REPORTING BURDEN

Public reporting for this collection of information is estimated to average 25 minutes (0.42 hour) per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and completing and reviewing the collection of information.
Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the:
> Assistant Executive Secretary (Administration), FDIC, Room F-453, Washington, DC 20429;
> and to the Office of Management and Budget, Paperwork Reduction Project (3064-0027), Washington, DC 20503.

1 Name of Registrant	The Mahoning National Bank of Youngstown
2 Location (City and State)	% Sky Trust N.A., 30050 Chagrin Blvd, Suite 150, Pepper Pike, OH 44124
Registered Transfer Agent Number	85- 85-10537

Answer every question. Use continuation page(s) if necessary.

2 Click here for information

Click here for instructions

3 State the bank's eligibility for requesting that its transfer agent activity be deregistered. Also discuss any securities which will continue to be transferred, or for which the bank is named as transfer agent.

Enter Answer here

Effective January 1, 2000, Mahoning National Bank of Youngstown transferred all of its trust business (including but not limited to its transfer agent activities) to Sky Trust, N.A. (file number 85-11364). As of that date, any transfer agent activities of Mahoning were effectuated by Sky Trust.

4 State the date on which the bank last transferred any securities for which transfer agent registration would be required.

Enter Answer here 12/31/99

5 State the name(s) and location(s) of the organization or person which will retain possession of the books and records which the bank maintained for its registered transfer agent functions.

Enter Answer here The books and records which Mahoning National Bank of Youngstown maintained for its registered transfer agent functions are now maintained by Sky Trust, N.A. at its location at 23 Federal Plaza, Youngstown, OH 44503.

6 State the name(s) and location(s) of any successor transfer agent(s). Also state whether any successor is a registered transfer agent and, if so, what its registered transfer agent number is.

Enter Answer here

As stated in the response to question 3 above, all transfer agent activities previously conducted by Mahoning National Bank of Youngstown are now handled through Sky Trust, N.A.

7 Describe any "out-of-proof" conditions in transfer agent issues or accounts.

Enter Answer here None

8 Describe any legal actions or proceedings, or potential claims against the bank, in connection with the performance of its registered transfer agent functions.

Enter Answer here None

9 Describe any unsatisfied judgements or liens against the bank arising out of performance of its registered transfer agent functions.

Enter Answer here None

EXECUTION: I certify that the information contained herein is true and correct to the best of my knowledge and belief.

NAME AND TITLE OF OFFICIAL RESPONSIBLE FOR REQUEST

EDWARD J. TOGNETTI, SVP + CHIEF FIDUCIARY OFFICER, SKY TRUST, N.A.

SIGNATURE OF OFFICIAL RESPONSIBLE FOR REQUEST	DATE
Edward J. Tognetti	01/18/03

NOTE:	Return completed form (original only) to: Comptroller of the Currency, Asset Management-Transfer Agent, 250 E Street SW, Washington, DC 20219. A copy should also be kept for the bank's files.