Edgar Filing: OHIO VALLEY BANC CORP - Form 4

| Form 4 | LEY BANC COF | RP | | | | | | | | | | |
|---|--|------------------|--|---|------|---|---|---|--|---|---|--|
| FORN Check the if no lon, subject to Section 2 Form 4 of Form 5 obligation may con | obligations may continue. See InstructionSection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5 | | | | |
| | Address of Reporting | Person <u>*</u> | 2. Issuer | r Name | and | Ticker or | Tradin | g | 5. Relationship of | Reporting Pers | on(s) to | |
| LANHAM CHARLES C | | | 2. Issuer Name and Ticker or Trading Symbol OHIO VALLEY BANC CORP [OVBC] | | | | | | Issuer (Check all applicable) | | | |
| (Last) 420 3RD A | 3. Date of Earliest Transaction (Month/Day/Year) 02/15/2005 | | | | | | Director10% Owner Officer (give titleX Other (specify below) below) Gov't. Relations | | | | | |
| | | | | 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 | | | |
| GALLIPOI | LIS, OH 4563102 | 40 | | | | | | | Form filed by M Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Tabl | e I - No | on-D | erivative | Securi | ties Acq | uired, Disposed of | , or Beneficial | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | | Code | 8) | 4. Securi n(A) or Di (Instr. 3, Amount | sposed | l of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 02/15/2005 | | | J <u>(1)</u> | V | 4.9904 | А | \$ 34.25 | 904.5909 | D | | |
| Common Stock | | | | | | | | | 498.2791 | I | By ESOP | |

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.

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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. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and unt of rlying tities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-----------------------|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------|------------------|--|--|--|--|
| 1.0.0 | Director | 10% Owner | Officer | Other | | | | |
| LANHAM CHARLES C 420 3RD AVE. P.O. BOX 240 GALLIPOLIS, OH 456310240 | | | | Gov't. Relations | | | | |
| Signatures | | | | | | | | |
| By: Melissa P. Mason - Power of Attorney | of | 02/1 | 5/2005 | | | | | |
| <u>**</u> Signature of Reporting Person | | Γ | 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) Shares acquired through OVBC's Dividend Reinvestment Plan (DRIP).

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.