#### OHIO VALLEY BANC CORP

Form 4

February 12, 2014

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

OMB Number:

3235-0287

Check this box if no longer

Expires:

January 31, 2005

0.5

subject to Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Estimated average burden hours per response...

**OMB APPROVAL** 

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

(Last)

1. Name and Address of Reporting Person \* BARNITZ ANNA P

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

OHIO VALLEY BANC CORP

(Check all applicable)

[OVBC]

(First) (Middle)

3. Date of Earliest Transaction

\_X\_\_ Director 10% Owner Officer (give title

(Month/Day/Year)

02/10/2014

below)

\_ Other (specify

420 3RD AVE., P.O. BOX 240

6. Individual or Joint/Group Filing(Check Applicable Line)

(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)

> \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

**GALLIPOLIS, OH 45631-0240** 

(City)	(State)	(Zip) Tal	ble I - Non	-Derivative S	ecurit	ies Acquire	d, Disposed of, or	r Beneficially	Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securities on Disposed of (Instr. 3, 4 and	(D)	red (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Shares	02/10/2014		Code $V$ $J_{\underline{(1)}}$	Amount 170.3035	(D)	Price \$ 22.6562	(Instr. 3 and 4) 4,258.0632	D	
Common Shares	02/10/2014		<u>J(1)</u>	0.2432	A	\$ 22.6562	26.4821	I	Custodian For Daughter
Common Shares	02/10/2014		<u>J(1)</u>	0.2432	A	\$ 22.6562	26.4821	I	Custodian For Son (hmb)
Common Shares	02/10/2014		J <u>(1)</u>	0.2432	A	\$ 22.6562	26.4821	I	Custodian For Son (bab)

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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.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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 Exerc	isable and	7. Titl	e and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Da	ate	Amou	int of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						]
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	m: 1	or		
						Exercisable	ible Date		Number		
				G 1 17	(A) (B)				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
DADNIJEZ ANNA D						

BARNITZ ANNA P 420 3RD AVE. P.O. BOX 240 GALLIPOLIS, OH 45631-0240

## **Signatures**

/s/ Deborah A. Carhart - Power of Attorney 02/12/2014

\*\*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).

Deletionships

(1) Acquisition under Ohio Valley Banc Corp. Dividend Reinvestment Plan.

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.

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