### Edgar Filing: WISEMAN THOMAS E - Form 4

WISEMAN	N THOMAS E											
Form 4												
February 2												
FOR	M 4 $_{\rm UNITED}$	STATES	SECU	RITIES	AND EXC	'НАГ	NGE CON	MMISSION	OMB API	ROVAL		
					n, D.C. 205				OMB Number:	3235-0287		
Check this box				0	,				Expires:	January 31,		
if no longer subject to STATEMENT OF			F CHA	CHANGES IN BENEFICIAL OWNERSHIP OF						2005 erage		
Section 16.				SECU	RITIES		burden hours	per				
-	Filed pu	(a) of the	Public 1	Utility Ho	the Securiti olding Com nt Company	pany	Act of 19	ct of 1934, 35 or Section	response	0.5		
(Print or Typ	e Responses)											
WISEMAN THOMAS E Syn			Symbol	l	nd Ticker or T Y BANC C		Iss	5. Relationship of Reporting Person(s) to ssuer				
			[OVB		I DAILLE C			(Check	all applicable)			
(Last)	(First)	(Middle)			Transaction			X Director X Officer (give t	title 10% (	Owner (specify		
				/Day/Year) /2019				ow) below) President/CEO				
	(Street)		4. If An	nendment, I	Date Original		6.	Individual or Joi	nt/Group Filing	(Check		
			Filed(M	Ionth/Day/Ye	ear)		-	plicable Line) _ Form filed by O	no Doporting Doro	<b>on</b>		
GALLIPC	DLIS, OH 45631-0	240						Form filed by Mo son				
(City)	(State)	(Zip)	Та	ble I - Non	-Derivative S	ecuri	ties Acquire	ed, Disposed of,	or Beneficially	Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution 1 any (Month/Da	Date, if	Code (Instr. 8)	4. Securities onDisposed of (Instr. 3, 4 at	(D) nd 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4	Ownership Form: Direct (D) or Indirect (I) ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common				Code V	Amount	(D)	Price \$	`	, 			
Shares	02/21/2019			J <u>(1)</u>	121.8292	А	ф 37.5259	21,892.127	4 D			
Common Shares	02/21/2019			J <u>(1)</u>	0.7339	А	\$ 37.5259	131.8973	Ι	Custodian for Granddaughter (AEW)		
Common Shares	02/21/2019			J <u>(1)</u>	0.7339	А	\$ 37.5259	131.8973	Ι	Custodian for Grandson (RAW)		
Common Shares								4,431.5496	Ι	By ESOP		

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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.

# 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	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Da	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	-				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
				~	(1) (5)				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
WISEMAN THOMAS E 420 3RD AVE. P.O. BOX 240 GALLIPOLIS, OH 45631-0240	Х		President/CEO					
Signatures								
/s/ Melissa P. Wooten power of								

/s/ Melissa P. Wooten, power of 02/22/2019 attorney

\*\*Signature of Reporting Person

## **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).

Date

(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.