### Edgar Filing: BARNITZ ANNA P - Form 4

BARNITZ Form 4 February 2												
•	ЛЛ								OMB AP	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549									OMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CH					IN BENEFI URITIES	Expires: Estimated av						
Section Form 4 Form 5 obligat may co <i>See</i> Ins 1(b).	or Filed pu	(a) of the l	Public I	16(a) of Utility H	f the Securit	npany	Act of 1	Act of 1934, 935 or Section	burden hours response	s per 0.5		
(Print or Type	e Responses)											
BARNITZ ANNA P Symb OHI			Symbol	VALLI	and Ticker or EY BANC (		Is	Relationship of Reporting Person(s) to suer (Check all applicable)				
(Last) 420 3RD A	(First) AVE., P.O. BOX 2	(Middle) 240	3. Date	of Earlies /Day/Yea	rt Transaction		_	_X Director Officer (give ti elow)		Owner (specify		
	(Street)			nendment Ionth/Day/Y	, Date Original Year)		А	. Individual or Join pplicable Line) X_ Form filed by Or Form filed by Mc	e Reporting Per	son		
	LIS, OH 45631-0						P	erson	ie unun one rup			
(City)	(State)	(Zip)	Та	ble I - No	on-Derivative	Securit	ties Acqui	red, Disposed of,	or Beneficially	y Owned		
1.Title of Security (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transact Code (Instr. 8)	4. Securities tionDisposed of (Instr. 3, 4 a	(D)	ired (A) or	Securities Beneficially Owned Following Reported Transaction(s)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)	)			
Common Shares	02/17/2012			J <u>(1)</u>	0.2679	А	\$ 18.771	1 24.2016	Ι	Custodian For Daughter		
Common Shares	02/17/2012			J <u>(1)</u>	0.2679	А	\$ 18.771	24.2016	I	Custodian For Son (hmb)		
Common Shares	02/17/2012			J <u>(1)</u>	0.2679	А	\$ 18.771	24.2016	I	Custodian For Son (bab)		
Common Shares	02/17/2012			J <u>(2)</u>	190.0203	А	\$ 18.771	2,889.4771	D			

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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. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	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		
									or		
						Date	Expiration		Number		
						Exercisable	Date		of		

Code V (A) (D)

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BARNITZ ANNA P							
420 3RD AVE.	x						
P.O. BOX 240	Λ						
GALLIPOLIS, OH 45631-0240							
Signatures							
/s/ Deborah A. Carhart - Power c	of						

/s/ Deborah A. Carhart - Power of Attorney 02/21/2012

Date

## **Explanation of Responses:**

\*\*Signature of Reporting Person

- \* 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) Acquisition under Ohio Valley Banc Corp. Dividend Reinvestment Plan.
- (2) Acquisition under Ohio Valley Banc Corp. Dividend Reinvestment Plan with voluntary additional contribution pursuant to a Rule 10b5-1 plan adopted by the reporting person.

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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