TISSUE ROBERT S

Form 4

December 08, 2017

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

OMB 3235-0287 Number:

Estimated average

5. Relationship of Reporting Person(s) to

D

D

I

Check this box if no longer subject to Section 16.

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

January 31, Expires: 2005

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

burden hours per response... 0.5

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

Common

Common

Common

Common

Stock

Stock

Stock

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person *

12/06/2017

12/06/2017

TISSUE ROBERT S			Symbol SUMMIT FINANCIAL GROUP INC [SMMF]				Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)			Director _X_ Officer (give				
PO BOX 1822			12/06/2017					below) below) Senior VP & CFO		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check		
			Filed(Month/Day/Year)					Applicable Line)		
								X Form filed by C	1 0	
LEWISBU	RG, WV 24901							Person	Iore than One Re	porting
(City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative	Securi	ties Acq	uired, Disposed of	, or Beneficiall	y Owned
1.Title of	2. Transaction Da	ate 2A. Dee	med	3.	4. Securi	ties Ac	quired	5. Amount of	6.	7. Nature of
Security	(Month/Day/Yea	r) Execution	on Date, if	Transaction	on(A) or Di	isposed	of (D)	Securities	Ownership	Indirect
(Instr. 3)		any		Code	(Instr. 3,	4 and 5	5)	Beneficially	Form: Direct	Beneficial
		(Month/	Day/Year)	(Instr. 8)				Owned	(D) or	Ownership
								Following	Indirect (I)	(Instr. 4)
						(A)		Reported	(Instr. 4)	
						or		Transaction(s) (Instr. 3 and 4)		
				Code V	Amount	(D)	Price	(msu. 5 and 4)		

7,178

3,177

76,218

73,041

740

11,864.0857

M

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

by Spouse

By ESOP

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SEC 1474

(9-02)

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. Transactic Code (Instr. 8)	5. Number coof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Ar Underlying Se (Instr. 3 and 4
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title
Employee Stock Optin (Right to Buy)	\$ 17.79					12/12/2004	12/12/2018(2)	Common Stock
Employee Stock Option (Right to Buy)	\$ 25.93					12/06/2005	12/07/2019(2)	Common Stock
Stock-Settled Stock Appreciation Rights	\$ 12.01	12/06/2017		M	7,178	04/22/2016(1)	04/23/2025	Common Stock
Stock-Settled Stock Appreciation Rights	\$ 26.01					02/09/2018(1)	02/09/2027	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
TISSUE ROBERT S			Senior				
PO BOX 1822			VP &				
LEWISBURG, WV 24901			CFO				

Reporting Owners 2

Signatures

Teresa D. Ely, Lmtd POA, Attorney-in-Fact

12/08/2017

**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).
- (1) Option and/or SAR vests in 5 equal annual installments with the beginning date indicated.
- (2) Option expires in 5 equal annual installments with the final dated indicated.

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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