PEOPLES BANCORP INC

Form 4 May 03, 2016

FORM 4

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

SECURITIES

OMB Number:

Expires:

3235-0287

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31,

2005

0.5

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OMB APPROVAL

Section 16. Form 4 or Form 5 obligations may continue.

Check this box

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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)

See Instruction

| 1. Name and A ABRAHAM | Symbol | 2. Issuer Name and Ticker or Trading Symbol PEOPLES BANCORP INC [PEBO] | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
|------------------------|---------------------|---|---------------------------------|---------------------------|--|------------------------|---|---|--|
| (Last) | (First) (1 | Middle) 3. Date of | 3. Date of Earliest Transaction | | | (Check all applicable) | | | |
| (Month | | | (Month/Day/Year) 05/02/2016 | | | | _X_ Director Officer (giv below) | | Owner er (specify |
| (Street) 4. I | | | 4. If Amendment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | |
| Fil MARIETTA, OH 45750 | | | Filed(Month/Day/Year) | | | | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | |
| | 1, 011 15750 | | | | | | Person | | |
| (City) | (State) | (Zip) Tak | le I - Non-D | erivative | Securi | ities Acc | quired, Disposed o | of, or Beneficial | lly Owned |
| 1.Title of Security | 2. Transaction Date | e 2A. Deemed | 3. | 4. Securi | ities A | cquired | 5. Amount of | 6. Ownership | 7 Nature of |
| (Instr. 3) | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Code | on(A) or D (D) (Instr. 3, | ispose 4 and (A) or | d of | Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect Beneficial Ownership (Instr. 4) |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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| 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transacti | 5. | 6. Date Exerc Expiration Da | | 7. Title and Amount of | 8. Price of Derivative | 9. Nu Deriv |
|------------------------|---|--------------------------------------|----------------------|--------------------|---------|--------------------------------|--------------------|---|------------------------|---|
| Security (Instr. 3) | or Exercise Price of Derivative Security | (i.i.dia. Dayi Teal) | any (Month/Day/Year) | Code (Instr. 8) | of | (Month/Day/) e | | Underlying Securities (Instr. 3 and 4 | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title Amour or Numbe of Shares | er | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| 1 8 | Director | 10% Owner | Officer | Other | | | |
| ABRAHAM TARA | | | | | | | |
| 138 PUTNAM ST | X | | | | | | |
| PO BOX 738 | Λ | | | | | | |
| MARIETTA, OH 45750 | | | | | | | |

Signatures

/s/ Kathryn Bailey, attorney-in-fact for Ms.
Abraham

05/03/2016

**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) Represents Board meeting fees and quarterly retainer paid in stock as part of non-employee director compensation.

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.

Reporting Owners 2