## Edgar Filing: JONES LARRY W - Form 5

JONES LA Form 5	RRY W									
January 16,	2019									
FORM	<b>Л</b> 5							OMB A	PPROVAL	
	UNITED		<b>RITIES AND EXCHANGE COMMISSION</b>				<b>MISSION</b>	OMB Number:	3235-0362	
Check th no longe	Wa	Washington, D.C. 20549					Expires:	January 31, 2005		
to Sectio Form 4 c 5 obligat may con <i>See</i> Instr	or Form ANN ions tinue. uction	OWNE	ATEMENT OF CHANGES IN BENEF OWNERSHIP OF SECURITIES					average rs per 1.0		
1(b). Form 3 H Reported Form 4 Transact Reported	Holdings Section 17( 1 ions	(a) of the Public U 30(h) of the In	Itility Holdi	ng Company	y Act	of 19				
1. Name and JONES LA	Symbol COMN	2. Issuer Name <b>and</b> Ticker or Trading Symbol COMMUNITY TRUST BANCORP INC /KY/ [CTBI]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (	(Month/	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2018				Director 10% Owner _X Officer (give title Other (specify below) below) Executive Vice President			
100 EAST	VINE STREET						Executiv	e vice Presid	ent	
		4. If Amendment, Date Original 6 Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting				
							(check	applicable line)	)	
LEXINGT	ON, KY 4050	7-1406				_X	_ Form Filed by O . Form Filed by M son			
(City)	(State)	(Zip) Tab	ole I - Non-De	rivative Secur	ities A	cquire	d, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	(Month/Day/Year)   a	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (E (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of Issuer's	Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Amount	(A) or (D)	Price	Fiscal Year (Instr. 3 and 4)	(I) (Instr. 4)		
Common Stock	12/31/2018	Â	J <u>(1)</u>	250.9304	А	\$ 0 (1)	851.203	Ι	By ESOP	
Common Stock	Â	Â	Â	Â	Â	Â	7,999	D	Â	
Common Stock	Â	Â	Â	Â	Â	Â	1,859	I	By IRA	

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

SEC 2270 (9-02)

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#### 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 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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. O B O Eı Fi (I
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
1	Director	10% Owner	Officer	Other				
JONES LARRY W 100 EAST VINE STREET LEXINGTON, KY 40507-1406	Â	Â	Executive Vice President	Â				
Signatures								
Larry W. Jones By: Marilyn T. Justic Attorney-in-Fact	ce,		01/16/2019					
<u>**</u> Signature of Reporting Person		Date						
Evalenation of Deen								

## **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).

These shares were acquired during the fiscal year under the Community Trust Bancorp, Inc. Employee Stock Ownership Plan at a price
(1) range of \$51.30 - \$44.53 per share in transactions that were exempt from Section 16(b) by virtue of old rule 16a-8(b). The information reported herein is based on plan statement dated December 31, 2018.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.