#### PEOPLES BANCORP INC

Form 5

February 14, 2017

#### **OMB APPROVAL** FORM 5 **OMB**

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

no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box if

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

Reported 30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1(b).

1. Name and Ad SULERZYSE	-		2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle)		(Middle)	PEOPLES BANCORP INC [PEBO] 3. Statement for Issuer's Fiscal Year Ended	(Check all applicable)			
138 PUTNAN	M ST Â PO	BOX 738	(Month/Day/Year) 12/31/2016	_X_ Director 10% Owner _X_ Officer (give title Other (specify below)			
(Street)		DOX 130	4. If Amendment, Date Original	President and CEO  6. Individual or Joint/Group Reporting			
,			Filed(Month/Day/Year)	(check applicable line)			

### MARIETTA, OHÂ 45750-0738

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person

(City)	(State)	(Zip) Tal	ble I - Non-De	rivative Sec	uritie	s Acquired	, Disposed of, or	r Beneficially	Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securitie or Disposed (Instr. 3, 4 a	osed of (D) S , 4 and 5) B		5. Amount of Securities Beneficially Owned at end of Issuer's	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership
				Amount	(A) or (D)	Price	Fiscal Year (Instr. 3 and 4)	(I)	(Instr. 4)
Common Stock	02/24/2016	Â	J <u>(1)</u>	10.338	A	\$ 17.684	44,520.145	D	Â
Common Stock	05/23/2016	Â	<u>J(1)</u>	12.334	A	\$ 20.826	44,532.479	D	Â
Common Stock	08/22/2016	Â	<u>J(1)</u>	13.533	A	\$ 23.116	44,546.012	D	Â
Common Stock	11/18/2016	Â	<u>J(1)</u>	13.708	A	\$ 28.124	44,559.72	D	Â
	02/26/2016	Â	<u>J(1)</u>	94.207	A	\$ 17.5	44,653.927	D	Â

3235-0362

January 31,

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Number:

Expires:

response...

Estimated average

burden hours per

Common Stock									
Common Stock	05/25/2016	Â	J <u>(1)</u>	183.217	A	\$ 21.26	44,837.144	D	Â
Common Stock	08/24/2016	Â	J <u>(1)</u>	77.706	A	\$ 22.996	44,914.85	D	Â
Common Stock	11/22/2016	Â	J <u>(1)</u>	67.613	A	\$ 28.276	44,982.463	D	Â

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.

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# 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)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SULERZYSKI CHARLES W 138 PUTNAM ST PO BOX 738 MARIETTA, OH 45750-0738	ÂX	Â	President and CEO	Â				

## **Signatures**

/s/ Kathryn Bailey, attorney-in-fact for Mr. 02/14/2017 Sulerzyski

\*\*Signature of Reporting Person Date

Reporting Owners 2

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### **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) Shares received as a result of participation in the Dividend Reinvestment Program.

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.