| McGhee Ja<br>Form 5<br>February 1<br><b>FORI</b>                      | 3, 2013  |  |   |   |   |           |   |  | OMB APP  | ROVAL   |  |
|---|--|--|---|---|---|-----------|---|--|--|---|--|
| FUN   | -  | STATES   | SECUI   | RITIES AN   | ND EXCHA  | ANG       | E COM                                     |  | OMB<br>Number:   | 3235-0362   |  |
|   | this box if<br>er subject                          |  | Wa  | shington, l   | D.C. 20549  |           |   |  |  | January 31,<br>2005   |  |
| to Secti<br>Form 4<br>5 obliga<br>may con<br><i>See</i> Inst<br>1(b). | or Form <b>AN</b><br>ations<br>ntinue.<br>truction | (  | <b>CATEMENT OF CHANGES IN BENEFICIAL</b><br><b>OWNERSHIP OF SECURITIES</b><br>Section 16(a) of the Securities Exchange Act of 1934, |   |   |           | Estimated ave<br>burden hours<br>response | erage  |  |   |  |
| · · ·   | Holdings Section 17                                | (a) of the F                                   | Public U  | tility Holdi  |   | iy Ac     | t of 193                                  |  |  |   |  |
| 1. Name and Address of Reporting Person <u>*</u><br>McGhee James E II |  |  | -   |   |   |           | Issu                                      | Relationship of Reporting Person(s) to<br>uer<br>(Check all applicable)                  |  |   |  |
| (Last)  | (Last) (First) (Middle)                            |  |   | <ol> <li>Statement for Issuer's Fiscal Year Ended<br/>(Month/Day/Year)</li> <li>12/31/2012</li> </ol> |   |           |   | XDirector10% Owner<br>Officer (give titleOther (specify<br>below)Dter (specify           |  |   |  |
| PO BOX  | 999  |  | 12/01/2   | 2012  |   |           |   |  |  |   |  |
|   | (Street)   |  | 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting<br>Filed(Month/Day/Year) (check applicable line)              |   |   |           | ing                                       |  |  |   |  |
| PIKEVIL   | LE, KY 41502                                       | 0999   |   |   |   |           |   | Form Filed by Or<br>Form Filed by Mc<br>on   |  |   |  |
| (City)  | (State)  | (Zip)  | Tab   | le I - Non-De   | rivative Secu   | rities    | Acquired                                  | l, Disposed of, o  | or Beneficially  | Owned   |  |
| 1.Title of<br>Security<br>(Instr. 3)                                  | 2. Transaction Date<br>(Month/Day/Year)            | 2A. Deemed<br>Execution D<br>any<br>(Month/Day | Date, if  | 3.<br>Transaction<br>Code<br>(Instr. 8)   | 4. Securities Acquired (A<br>or Disposed of (D)<br>(Instr. 3, 4 and 5)<br>(A) |           | red (A)                                   | 5. Amount of<br>Securities<br>Beneficially<br>Owned at end<br>of Issuer's<br>Fiscal Year | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| G   |  |  |   |   | Amount  | or<br>(D) | Price                                     | (Instr. 3 and 4)   | ) (Instr. 4)   |   |  |
| Common<br>Stock   | 01/03/2012   | Â  |   | J <u>(1)</u>  | 198.3538  | А         | \$<br>29.99                               | 20,087.4799  | ) D  | Â   |  |
| Common<br>Stock   | 04/01/2012   | Â  |   | J <u>(1)</u>  | 185.5548  | А         | \$<br>32.39                               | 20,273.0347  | 7 D  | Â   |  |
|   |  |  |   |   |   |           | \$  |  |  |   |  |
| Common<br>Stock   | 07/02/2012   | Â  |   | J <u>(1)</u>  | 180.6383  | А         | ф<br>33.59                                | 20,453.673   | D  | Â   |  |

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By Son

## Common Stock

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

Persons who respond to the collection of informationSEC 2270contained in this form are not required to respond unless(9-02)the form displays a currently valid OMB control number.(9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transaction<br>Code<br>(Instr. 8) | 5.<br>Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4 and 5) |                     | ate                | Secur | ant of<br>rlying       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9.<br>O<br>B<br>B<br>O<br>Eı<br>Is<br>Fi<br>(I |
|---|---|---|--|---------------------|--------------------|-------|------------------------|---|--|
|   |   |   | 4, and 5)  | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number |   |  |

|     |     | Exercisable | Date | Title | Numbe<br>of |
|-----|-----|-------------|------|-------|-------------|
| (A) | (D) |             |      |       | Shares      |

## **Reporting Owners**

| Reporting Owner Name / Address                                       | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
| , o  | Director      | 10% Owner | Officer | Other |  |  |  |
| McGhee James E II<br>PO BOX 999<br>PIKEVILLE, KY 415020999           | ÂX            | Â         | Â       | Â     |  |  |  |
| Signatures   |               |           |         |       |  |  |  |
| James E. McGhee II By: Marilyn T. Justice,<br>Attorney-in-Fact 02/13 |               |           |         |       |  |  |  |
| **Signature of Reporting   | 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) Community Trust Bancorp, Inc. Dividend Reinvestment Plan Shares.

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.