FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* Markwood Julie R						2. Issuer Name and Ticker or Trading Symbol SUMMIT FINANCIAL GROUP, INC. SMMF]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify					
(Last) (First) (Middle) 39 HELMICK DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 04/14/2023									X Officer (give title Officer (specify below) EVP & Chief Accounting Officer					
(Street) PURGITSVILLE WV 26852					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)					Ru	Rule 10b5-1(c) Transaction Indication														
											iction was ma ule 10b5-1(c)				t, instruction	or written p	lan tha	at is intended	to satisfy	
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired,	Dis	posed of	f, or l	Bene	ficially	Owned					
Date				Date	ansaction hth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		A) or D)	Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common S	Stock														4,0)61		D		
Common Stock															253		I		As Cust for Children	
Common Stock 04/14/2						2023(2)		J		774.5461 ⁽³⁾ A		\$0	12,816		I		By Esop			
		T	able II -								osed of, convertib				Owned				<u> </u>	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transactic Code (Insi 8)		on of E		6. Date Exercisable and Expiration Date (Month/Day/Year))			ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
			Code		v			Date Exercisab	ole	Expiration Date	Title	0 N 0	mount r lumber f hares							
Stock- Settled Stock Appreciation Rights	\$26.01								02/09/201	8 ⁽¹⁾	02/09/2027	Comi Stoo		2,802		2,802	!	D		
Stock- Settled Stock Appreciation Rights	\$23.94								02/07/202	0(1)	02/07/2029	Comi Sto		5,828		5,828	3	D		
Stock- Settled Stock Appreciation Rights	\$21.85								07/15/202	2 ⁽¹⁾	07/15/2031	Comi Stoo		5,858		5,858	3	D		
Stock- Settled Stock Appreciation	\$26.37								02/09/202	4 ⁽¹⁾	02/09/2033	Comi		5,635		5,635	;	D		

Explanation of Responses:

- 1. SAR vests in 5 equal annual installments with the beginning date indicated
- 2. The information reported herein is based on a plan statement dated 12/31/2022 received in April 2023
- 3. Between January 1, 2022 and December 31, 2022, acquired 774.5461 shares of Summit Common Stock under the Summit Financial Group, Inc. Employee Stock Ownership Plan.

/s/ Teresa D Ely, Lmtd POA, Attorney-in-Fact

04/14/2023

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.