FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S 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

						or Sec	tion 30(n) or t	ne investme	ent c	omر	ipany Act o	1 1940							
1. Name and Address of Reporting Person * $ \underline{MILLER\ RONALD\ F} $		<u>S</u>											5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) (First) (Middle) PO BOX 2777			3.	3. Date of Earliest Transaction (Month/Day/Year) 05/07/2008 X Officer (give title below) below) President, Subsidiary Bank												specify				
(Street) WINCHESTER VA 22604				4. If Amendment, Date of Original Filed (Month/Day/Year) 05/07/2008									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)														Person						
		Ta	ble I - Non	ı-Deriv	/ativ	/e Se	ecurit	ies /	Acquired	, D	isp	osed of	, or Ben	efic	ially	Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Disposed C Code (Instr. 5)		ies Acquired (A) or Of (D) (Instr. 3, 4 and					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	_	Amount	(A) or (D)	Pr	ice	Transaction(s) (Instr. 3 and 4)				ļ,	
Common Stock									-			+			8,470		D			
Common Stock		05/07	//200	8(3)	(3)		J ⁽⁴⁾			1,085	35 A		\$ <mark>0</mark>	6,777		77 I		By ESOP		
			Table II - I						equired,							Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year)			ate, T	4. Transaction Code (Instr. 8)		of Exp		Expiration	oate Exercisable and oiration Date onth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5) 8. Numb derivative Securitic Owned Followin Reporte Transact (Instr. 4)		e s ully	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				c	Code	v	(A)	(D)	Date Exercisabl	e	Exp Dat	oiration te	Title	or	ount nber ires					
Employee Stock Option (Right to Buy)	\$5.21								02/26/1999	(1)	12/	26/2013 ⁽²⁾	Common Stock	8,0	000		8,000	0	D	
Employee Stock Option (Right to Buy)	\$5.95								10/26/2002	(1)	10/	26/2016 ⁽²⁾	Common Stock	4,0	000		4,000)	D	
Employee Stock Option (Right to Buy)	\$9.49								12/06/2003	(1)	12/	06/2017 ⁽²⁾	Common Stock	4,4	400		4,400)	D	
Employee Stock Option (Right to Buy)	\$17.79								12/12/2004	(1)	12/	12/2018 ⁽²⁾	Common Stock	6,0	000		6,000)	D	
Employee Stock Option (Right to Buy)	\$25.93								12/06/200	5	12/	07/2019 ⁽²⁾	Common Stock	6,0	000		6,000)	D	
Employee Stock Option (Right to	\$24.44								12/06/200	5	12	2/06/2015	Common Stock	6,0	000		6,000)	D	

Explanation of Responses:

- $1.\ Option\ vests\ in\ 5\ equal\ annual\ installments\ with\ beginning\ date\ indicated$
- 2. Option expires in 5 equal annual installments with the final date indicated
- 3. The information reported herein is based on a plan statement dated 12/31/07 received in May 2008.
- 4. Acquired through employer contributions to Summit Financial Group, Inc. Employee Stock Ownership Plan in reliance on old rule 16-a8(g)(3).

Remarks:

Attorney-in-Fact

** 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.