Fox Robert J Form 4 February 19, 2009

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Last)

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * Fox Robert J

(First)

(Street)

2. Issuer Name and Ticker or Trading Symbol

Issuer

AMERICAN RIVER

BANKSHARES [AMRB]

(Check all applicable)

5. Relationship of Reporting Person(s) to

3. Date of Earliest Transaction (Month/Day/Year)

Officer (give title below)

X_ Director

10% Owner Other (specify

4740 CHANCERY WAY

02/18/2009 4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

(Instr. 4)

Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

CARMICHAEL, CA 95608

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

(Middle)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I)

(Instr. 4)

(A) or

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless 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 3. Transaction Date 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and Amount of 4. **Expiration Date** Derivative Conversion (Month/Day/Year) Execution Date, if **Underlying Securities** Transactionof (Month/Day/Year) (Instr. 3 and 4) Security or Exercise Code any Derivative

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| (Instr. 3) | Price of Derivative Security | | (Month/Day/Year) | (Instr. 8) | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | , | | | |
|---------------------|------------------------------------|------------|------------------|------------|---|---------------------|--------------------|-----------------|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Option/Right to Buy | \$ 8.5 | 02/18/2009 | 02/18/2009 | A | 557 | 02/18/2010 | 02/18/2019 | Common Stock | 0 |
| Option/Right to Buy | \$ 8.5 | 02/18/2009 | 02/18/2009 | A | 557 | 02/18/2011 | 02/18/2019 | Common Stock | 0 |
| Option/Right to Buy | \$ 8.5 | 02/18/2009 | 02/18/2009 | A | 557 | 02/18/2012 | 02/18/2019 | Common Stock | 0 |
| Option/Right to Buy | \$ 8.5 | 02/18/2009 | 02/18/2009 | A | 557 | 02/18/2013 | 02/18/2019 | Common Stock | 0 |
| Option/Right to Buy | \$ 8.5 | 02/18/2009 | 02/18/2009 | A | 557 | 02/18/2014 | 02/18/2019 | Common Stock | 0 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|
| 1 6 | Director | 10% Owner | Officer | Other | | |
| Fox Robert J | | | | | | |
| 4740 CHANCERY WAY | X | | | | | |
| CARMICHAEL, CA 95608 | | | | | | |

Signatures

/s/ Robert J. Fox 02/18/2009

**Signature of Date
Reporting Person

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).

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

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