Edgar Filing: AMES NATIONAL CORP - Form 4

AMES NAT	IONAL CORP										
Form 4											
October 20, 2											
FORM	4 UNITED S		CURITIES A Washington,			NGE C	COMMISSION	OMB AF OMB Number:	PROVAL 3235-0287		
Check thi if no long subject to Section 1	0	BENEF		LOW	NERSHIP OF	Expires: January 31 2005 Estimated average burden hours per					
Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	Filed purs ns Section 17(a) of the Publi		ling Con	ipany	Act of	e Act of 1934, 7 1935 or Section 0	response	0.5		
(Print or Type R	Responses)										
MCGILL STEPHEN C Sy			2. Issuer Name and Ticker or Trading Symbol AMES NATIONAL CORP [ATLO]				5. Relationship of Reporting Person(s) to Issuer				
(N			3. Date of Earliest Transaction Month/Day/Year) 10/19/2005				(Check all applicable) Director 10% Owner Officer (give titleX Other (specify below) President of Subsidiary Bank				
			Amendment, Da d(Month/Day/Year)	endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
AMES, IA 5	50010						Form filed by M Person	lore than One Re	porting		
(City)	(State) (Zip)	Table I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date any	3. e, if Transactio Code ear) (Instr. 8) Code V	(Instr. 3,	spose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
Common stock	10/19/2005		P	100	A	\$ 23.68	550	D			

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.

 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)	4. Transact Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	s I		Amou Unde Secur	le and unt of rlying ities (1, 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting officer tame / rear cos	Director	10% Owner	Officer	Other			
MCGILL STEPHEN C PO BOX 846 AMES, IA 50010				President of Subsidiary Bank			
Signatures							
John P Nelson by power of attorney		10/20/2005					
**Signature of Reporting Person		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).

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.