

Bender Kevin
 Form 3
 January 04, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Bender Kevin		(Month/Day/Year)	AMERICAN RIVER BANKSHARES [AMRB]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
1003 MOONLIT WAY			(Check all applicable)	
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below)	
FOLSOM,Â CAÂ 95630-7506			Sr. VP & CIO	
(City)	(State)	(Zip)	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	4,245	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Title	Amount or Number of		

Edgar Filing: Bender Kevin - Form 3

				Shares		(I) (Instr. 5)	
Stock Option, Right to Buy	11/17/2004	11/17/2009	Common Stock	18,232	\$ 8.4329	D	Â
Stock Option, Right to Buy	03/19/2004	03/19/2013	Common Stock	551	\$ 14.1854	D	Â
Stock Option, Right to Buy	03/19/2005	03/19/2013	Common Stock	551	\$ 14.1854	D	Â
Stock Option, Right to Buy	03/19/2006	03/19/2013	Common Stock	551	\$ 14.1854	D	Â
Stock Option, Right to Buy	03/19/2007	03/19/2013	Common Stock	551	\$ 14.1854	D	Â
Stock Option, Right to Buy	03/19/2008	03/19/2013	Common Stock	552	\$ 14.1854	D	Â
Stock Option, Right to Buy	04/21/2005	04/21/2014	Common Stock	630	\$ 20.4	D	Â
Stock Option, Right to Buy	04/21/2006	04/21/2014	Common Stock	630	\$ 20.4	D	Â
Stock Option, Right to Buy	04/21/2007	04/21/2014	Common Stock	630	\$ 20.4	D	Â
Stock Option, Right to Buy	04/21/2008	04/21/2014	Common Stock	630	\$ 20.4	D	Â
Stock Option, Right to Buy	04/21/2009	04/21/2014	Common Stock	630	\$ 20.4	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Bender Kevin 1003 MOONLIT WAY FOLSOM, CA 95630-7506	Â	Â	Â Sr. VP & CIO	Â

Signatures

Kevin B. Bender 01/03/2005

__Signature of
Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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.