FORM 5

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C	20549
wasinington,	D.C.	20343

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPROVAL						
OMB Number:	3235-0362					
Estimated average burden						

Section obligate Instruction	tions may contiction 1(b). 3 Holdings Rep	nue. See	AL STAT	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB Number: 3235-0362 Estimated average burden hours per response: 1.0															
Form	4 Transactions	Reported.	Fil	led pursuant t or Sectio	o Sec on 30(l	tion 16 h) of th	S(a) of the ne Inves	ne Secu tment C	ırities Exch Company A	ange Ac ct of 194	t of 193 0	4							
1. Name and Address of Reporting Person* MITCHELL JOHN C				2. Issuer Name and Ticker or Trading Symbol NBT BANCORP INC [NBTB]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner								
(Last)	(F TH BROAI	irst) O STREET	(Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004							Officer (give title Other (speci					pecify		
(Street)	CH N	Y	13815	4. If Amer	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)	(S	State)	(Zip)	-									Perso		viore trial	ii One i	Сроп	ang	
		Tal	ole I - Non-Deri	vative Sec	curiti	ies A	cquir	ed, D	isposed	of, or	Bene	eficia	lly Owne	d					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired Of (D) (Instr. 3, 4 and					5. Amount Securities Beneficial Owned at	ly end of	Owners Form: I		Indire Bene Owne	lature of irect neficial nership		
								Amount ((A) or (D)	Price		Issuer's Fi Year (Instr 4)		Indirec (Instr. 4	direct (I)		(Instr. 4)	
NBT Bar	ncorp Inc. C	Common Stock	12/31/2004				J	60	4.524	A	\$	0(1)	27,119	0.133	D)			
NBT Bar	ncorp Inc. C	Common Stock											164,0	141 I by Corp		poration			
		,	Table II - Deriva (e.g.,	ative Secu puts, calls									y Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of E		Expira	5. Date Exercisable and Expiration Date Month/Day/Year)		Amor Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Num derivat Securi Benefic Owned Follow Report Transa (Instr. 4	tive ties cially I ing ed action(s)	Owner Form: Direct or Indi (I) (Ins		Beneficial (D) Ownership irect (Instr. 4)	
					(A)	(D)	Date Exerci	sable	Expiration Date	n Title	0 N 0	umber							
Non- Qualified Stock Option (right to buy)	\$14.3492						01/28/2003		01/28/2003 ⁽²⁾		2003 ⁽²⁾ 01/28/2012		T orp c. non ck	658		6	558 D		
Non- Qualified Stock Option (right to buy)	\$16.0625						01/22/	2002 ⁽²⁾	01/22/201	NE Band Ind Comi Sto	orp c. non	350		3	50	D		D	
Non- Qualified Stock Option (right to buy)	\$17.6008						01/01/2	2004 ⁽²⁾	01/01/201	NB Band Ind Comi	orp :. non	1,012		1,	012	D			
Non- Qualified Stock Option (right to buy)	\$22.1388						01/01/	2005 ⁽²⁾	01/01/201	NB Banc 4 Ind Comi Sto	orp :. non	1,438		1,	438	D			
Non- Qualified Stock Option (right to	\$23.8325						11/10/2	2006 ⁽³⁾	11/10/201	NB Banc 4 Ind Comi	orp	1,034		1,	034	D			

Explanation of Responses:

- 1. Shares acquired under NBT Bancorp Dividend Reinvestment Plan during period of January 1, 2004 to December 31, 2004 at prices ranging from \$21.9771 to \$26.4761 per share.
- 2. Pursuant to NBT Non-Employee Director, Divisional Director and Subsidiary Director Stock Option Plan grant vests 40% for first year, 20% annually for following years.
- 3. Pursuant to NBT Non-Employee Director, Divisional Director and Subsidiary Director Stock Option Plan reload grant vests 100% two years after date of its grant.

Mitchell

** 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.