Edgar Filing: SIMMONS FIRST NATIONAL CORP - Form 4

SIMMONS FIRST NATIONAL CORP

Form 4

November 09, 2015

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

January 31, 2005

0.5

Estimated average

burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

1. Name and Address of Reporting Person *

KIRKLAND CHRISTOPHER R

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

2. Issuer Name and Ticker or Trading

SIMMONS FIRST NATIONAL

Symbol

CORP [SFNC]

1(b).

(Print or Type Responses)

Claim Clai					COK	r [srnc	J						
NASHVILLE, TN 37215 (City (State) (Zip) Table I - No-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Month/Day/Year) (Instr. 3) (Month/Day/Year) (Month/Day/Year) (Instr. 3) SFNC 11/05/2015 Filed/Worth/Day/Year) (Zip) Table I - No-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3.			(Month/Day/Year)					Officer (g	give title	Other (specify			
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Month/Day/Year) (Instr. 3) (Month/Day/Year) (Month/Day/Year) SFNC 11/05/2015 S 10,000 D 5 SFNC SFNC SFNC SFNC SFNC SFNC SFNC SFNC	` '			_					Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
1.Title of Security (Month/Day/Year) (Instr. 3) SERVICE SERVICE SECURITIES ACQUITED SECURITIES ACQUITED SECURITY (Month/Day/Year) (Instr. 3) 1.Title of Security (Month/Day/Year) (Month/Day/Year) (Instr. 3) SERVICE SERVICE SECURITIES SECURI		(City)	(State)	(Zip)	т	abla I Na	n Danivati	vo So	numities A		d of an Donof	icially Owned	
SFNC 11/05/2015 S 10,000 D 53.47 6/8,/15 I Trust SFNC 245,619 D SFNC 4,975 I Spouse Custodian for child (Bonner Elizabeth) SFNC 17,644 I Custodian for child (Hayden		1.Title of Security	2. Transaction Date	2A. Deemed Execution Da	ate, if	3. Transaction Code (Instr. 8)	4. Securit on(A) or Dis (Instr. 3, 4	ies Ac sposed 4 and 5	quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	
SFNC 4,975 I Spouse Custodian for child (Bonner Elizabeth) SFNC 17,644 I Custodian for child (Hayden		SFNC	11/05/2015			S	10,000	D		678,715	I	Trust	
SFNC 17,644 I Custodian for child (Bonner Elizabeth) SFNC 17,644 I Custodian for child (Hayden		SFNC								245,619	D		
SFNC		SFNC								4,975	I	Spouse	
SFNC 17,644 I child (Hayden		SFNC								17,644	I	child (Bonner	
		SFNC								17,644	I	child (Hayden	

Edgar Filing: SIMMONS FIRST NATIONAL CORP - Form 4

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.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene

Follo Repo Trans (Insti

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	e and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Da	ate	Amou	int of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired]
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration	m: .1	or		
						Exercisable Da	Date	Title	Number		
				C 1 17	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
KIRKLAND CHRISTOPHER R 4306 ESTESWOOD DRIVE NASHVILLE, TN 37215	X							

Signatures

/s/ Christopher R. Kirkland by Piper P. Erwin

rwin 11/09/2015

**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.

Reporting Owners 2