#### FEHLMAN ROBERT A

Form 4

January 03, 2018

## FORM 4

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

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

**OMB APPROVAL** 

Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

Estimated average burden hours per response... 0.5

may continue. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* FEHLMAN ROBERT A

2. Issuer Name and Ticker or Trading

Symbol

12/29/2017

5. Relationship of Reporting Person(s) to

Issuer

SIMMONS FIRST NATIONAL CORP [SFNC]

(Check all applicable)

SIMMONS FIRST NATIONAL

(First)

(Street)

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

Director 10% Owner \_X\_\_ Officer (give title Other (specify below)

SEVP, CFO & Treasurer

CORP, 501 MAIN STREET

(Middle)

4. If Amendment, Date 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

PINE BLUFF, AR 71601

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
SFNC	12/29/2017		A	12,500	A	\$ 57.1	42,580	D	
SFNC	12/29/2017		F	6,107	D		36,473	D	
SFNC	12/31/2017		F	241	D	\$ 57.25	36,232	D	
SFNC	01/02/2018		F	159	D	\$ 57.25	36,073	D	
SFNC							633	D	
SFNC							7,636	D	

#### Edgar Filing: FEHLMAN ROBERT A - 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 Own Follo Repo Trans

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	cisable and	7. Tit	le and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNur		umber	Expiration Date		Amount of		Derivative	
Security	or Exercise		any	Code	of	f	(Month/Day/	Year)	Under	rlying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	3) D	erivative			Secur	ities	(Instr. 5)	
	Derivative				Se	ecurities			(Instr. 3 and 4)			
	Security				A	cquired						
					(A	A) or						
					D	isposed						
					of	f (D)						
					(I	nstr. 3,						
					4,	and 5)						
										Amount		
										Amount		
							Date	Expiration	TP:41	or		
							Exercisable	Date	Title Numl			
				C 1	<b>3</b> 7 ()	4) (D)				of		
				Code	V (A	A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

FEHLMAN ROBERT A SIMMONS FIRST NATIONAL CORP 501 MAIN STREET PINE BLUFF, AR 71601

SEVP, CFO & Treasurer

### **Signatures**

/s/ Robert A. Fehlman by Piper P.

Erwin 01/03/2018

\*\*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.

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