SIMMONS FIRST NATIONAL CORP

Form 4 May 13, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations

may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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

2. Issuer Name and Ticker or Trading

SIMMONS FIRST NATIONAL

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

(City)

1. Name and Address of Reporting Person *

FEHLMAN ROBERT A

(Last) (First) (Middle)

SIMMONS FIRST NATIONAL CORP, 501 MAIN STREET

(Street)

(Zip)

05/13/2015

3. Date of Earliest Transaction

CORP [SFNC]

(Month/Day/Year)

4. If Amendment, Date Original Filed(Month/Day/Year)

Symbol

PINE BLUFF, AR 71611

(State)

OMB APPROVAL

OMB Number:

3235-0287

Expires:

January 31, 2005

Estimated average burden hours per

response...

0.5

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner

X_ Officer (give title Other (specify below)

SEVP, CFO & Treasurer

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

(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. Transactic Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	sposed	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
SFNC	05/13/2015		M	940	A	\$ 24.5	31,411	D			
SFNC	05/13/2015		S	2,350	D	\$ 43.63	29,061	D			
SFNC							7,034	D			
SFNC							229	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

SEC 1474 (9-02)

Edgar Filing: SIMMONS FIRST NATIONAL CORP - Form 4

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. l De Sec (In
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Incentive Stock Option	\$ 24.5	05/23/2005	05/13/2015	M	376	05/23/2005	05/23/2015	Common	376	\$
Incentive Stock Option	\$ 24.5	05/23/2005	05/13/2015	M	188	05/23/2007	05/23/2015	Common	188	\$
Incentive Stock Option	\$ 24.5	05/23/2005	05/13/2015	M	188	05/23/2008	05/23/2015	Common	188	\$
Incentive Stock Option	\$ 24.5	05/23/2005	05/13/2015	M	188	05/23/2009	05/23/2015	Common	188	\$

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

FEHLMAN ROBERT A SIMMONS FIRST NATIONAL CORP 501 MAIN STREET PINE BLUFF, AR 71611

SEVP, CFO & Treasurer

Signatures

/s/ Robert A. Fehlman by Piper P.

Erwin 05/13/2015

**Signature of Reporting Person Date

Reporting Owners 2

Edgar Filing: SIMMONS FIRST NATIONAL CORP - Form 4

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.