### Edgar Filing: MAKRIS GEORGE JR - Form 4

| Form 4  | GEORGE JR  |  |                           |   |  |  |         |             |  |   |                    |  |
|---|--|--|---------------------------|---|--|--|---------|-------------|--|---|--------------------|--|
| February 2  |  |  |                           |   |  |  |         |             |  |   | PPROVAL            |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION   |  |  |                           |   |  |  |         |             |  |   |                    |  |
|   |  |  |                           | ashing  | tor  | n, D.C. 2                                      | Number: | 3235-0287   |  |   |                    |  |
| if no lo<br>subjec<br>Section<br>Form 4<br>Form 5<br>obligat<br>may co<br><i>See</i> Ins<br>1(b). | MENT OF<br>rsuant to Se<br>(a) of the P<br>30(h) c | ection<br>ublic U  | SEC<br>16(a) o<br>Utility | C <b>U</b><br>of ti<br>Ho   | Expires: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5<br>n |  |         |             |  |   |                    |  |
| (Print or Typ   | e Responses)                                       |  |                           |   |  |  |         |             |  |   |                    |  |
| MAKRIS GEORGE JR Symt   |  |  |                           | ssuer Name <b>and</b> Ticker or Trading<br>bol<br>IMONS FIRST NATIONAL<br>RP [SFNC] |  |  |         |             | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                                      |   |                    |  |
| (Last) (First) (Middle) 3. Date<br>(Mont  |  |  |                           | te of Earliest Transaction<br>th/Day/Year)<br>4/2019                                |  |  |         |             | X Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>Chairman & CEO                    |   |                    |  |
| PINE BL   | (Street)<br>UFF, AR 71601                          |  |                           | nendmer<br>onth/Day   |  | Date Origin<br>ar)                             | nal     |             | 6. Individual or J<br>Applicable Line)<br>_X_ Form filed by<br>Form filed by<br>Person                             |   | erson              |  |
| (City)  | (State)  | (Zip)  | Ta                        | ble I - N   | lon-   | Derivativ                                      | e Seci  | urities Ac  | equired, Disposed o  | f, or Beneficia   | lly Owned          |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction Date<br>(Month/Day/Year)            | 2. Transaction Date 2A. Deemed<br>(Month/Day/Year) Execution Date, if<br>any<br>(Month/Day/Year) |                           |   | 8)   | 4. Securi<br>n(A) or D<br>(Instr. 3,<br>Amount | ispose  | d of (D)    | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)<br>7. Nature of<br>Beneficial<br>Ownership<br>(Instr. 4) |                    |  |
| SFNC  | 02/24/2019   |  |                           | F   |  | 845  | D       | \$<br>27.54 | 141,444  | D   |                    |  |
| SFNC  |  |  |                           |   |  |  |         |             | 220,766  | D   |                    |  |
| SFNC  |  |  |                           |   |  |  |         |             | 1,016  | D   |                    |  |
| SFNC  |  |  |                           |   |  |  |         |             | 2,669  | D   |                    |  |
| SFNC  |  |  |                           |   |  |  |         |             | 3,742  | I   | By Trust           |  |
| SFNC  |  |  |                           |   |  |  |         |             | 8,100  | I   | By IRA             |  |
| SFNC  |  |  |                           |   |  |  |         |             | 9,500  | Ι   | By IRA<br>(Spouse) |  |

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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.

# 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. Titl | e and      | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------|-------------|---------|------------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | onNumber   | Expiration D  | ate         | Amou    | nt of      | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/   | Year)       | Under   | lying      | Security    | Secu   |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e             |             | Securi  | ties       | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |               |             | (Instr. | 3 and 4)   |             | Owne   |
|             | Security    |                     |                    |            | Acquired   |               |             |         |            |             | Follo  |
|             | -           |                     |                    |            | (A) or     |               |             |         |            |             | Repo   |
|             |             |                     |                    |            | Disposed   |               |             |         |            |             | Trans  |
|             |             |                     |                    |            | of (D)     |               |             |         |            |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |               |             |         |            |             |        |
|             |             |                     |                    |            | 4, and 5)  |               |             |         |            |             |        |
|             |             |                     |                    |            |            |               |             |         | <b>.</b> . |             |        |
|             |             |                     |                    |            |            |               |             |         | Amount     |             |        |
|             |             |                     |                    |            |            | Date          | Expiration  |         | or         |             |        |
|             |             |                     |                    |            |            | Exercisable   | Date        |         | Number     |             |        |
|             |             |                     |                    | <u> </u>   |            |               |             |         | of         |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |               |             |         | Shares     |             |        |

## **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |                   |       |  |  |  |
|---|---------------|-----------|-------------------|-------|--|--|--|
|   | Director      | 10% Owner | Officer           | Other |  |  |  |
| MAKRIS GEORGE JR<br>SIMMONS FIRST NATIONAL CORP.<br>501 MAIN STREET<br>PINE BLUFF, AR 71601 | X             |           | Chairman<br>& CEO |       |  |  |  |
| Signatures  |               |           |                   |       |  |  |  |
| /s/ George Makris, Jr. by Natalie<br>Gassiott   | 02/26/        | 2019      |                   |       |  |  |  |
| *Signature of Reporting Person  | Date          | e         |                   |       |  |  |  |

### <u>\*\*</u>Signature of Reporting Person 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.