### **IBERIABANK CORP**

Form 4/A August 26, 2015

## FORM 4

### OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or HANCECIN DENEEDCIAL OWNEDCHID OF

Expires: January 31, 2005

Section 16. Form 4 or Form 5 obligations STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response...

obligations may continue. See Instruction

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 sponse... 0.5

1(b).

**COMMON** 

**STOCK** 

(Print or Type Responses)

1. Name and Address of Reporting Person * BROWN MICHAEL J			2. Issuer Name <b>and</b> Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer			
	IBERIA	IBERIABANK CORP [IBKC]					(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction									
200 WEST CONCRESS STREET			(Month/Day/Year)					Director 10% Owner Number Officer (give title Other (spec				
200 WEST CONGRESS STREET			03/01/2015						below)  VICE CHAIRMAN			
(Street) 4.				4. If Amendment, Date Original				6. I	6. Individual or Joint/Group Filing(Check			
	Filed(Month/Day/Year)					Applicable Line)						
LAFAYETTE, LA 70501				03/03/2015					_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-l	De	rivative Secu	ırities	Acquire	d, Disposed of, o	r Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Executi any	emed on Date, if /Day/Year)	3. Transact Code (Instr. 8)	ioi	4. Securities or Disposed (Instr. 3, 4 an	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)	
COMMON STOCK	03/01/2015			$M_{\underline{(1)}}$		756.1048	A	(2)	115,360	D		
COMMON STOCK	03/01/2015			D(1)		756.1048	D	\$ 63.12	114,603	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

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### Edgar Filing: IBERIABANK CORP - Form 4/A

#### number.

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

1. Title of Derivative Security		2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	TransactionDer			6. Date Exercisable and Expiration Date		7. Title at Underlyit
	(Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 a
					Code V	(A)	(D)	Date Exercisable	Expiration Date	Title
	PERFORMANCE	(2)	03/01/2015		M(3)		756 1048	03/01/2015	03/01/2015	COMM

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### **Reporting Owners**

(2)

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			

03/01/2015

**BROWN MICHAEL J** 200 WEST CONGRESS STREET LAFAYETTE, LA 70501

VICE CHAIRMAN

 $M^{(3)}$ 

756.1048 03/01/2015 03/01/2015

# **Signatures**

MICHAEL J.

**UNITS** 

**BROWN** 08/26/2015 \*\*Signature of Reporting Date 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).
  - SETTLEMENT OF PERFORMANCE UNITS. THE CASH-SETTLED PERFORMANCE UNITS WERE DISTRIBUTED TO THE
- (1) REPORTING PERSON AFTER THE ACHIEVEMENT OF PRE-DETERMINED PERFORMANCE MEASURES OVER A 1-YEAR PERIOD.
- (2) EACH PERFORMANCE UNIT IS THE ECONOMIC EQUIVALENT OF ONE SHARE OF IBKC COMMON STOCK.
- (3) PAYMENT OF CASH IN SETTLEMENT OF PERFORMANCE UNITS.

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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