

SIMMONS FIRST NATIONAL CORP
 Form 4/A
 January 27, 2016

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2015
 Estimated average burden hours per response... 0.5

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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
MAKRIS GEORGE JR

2. Issuer Name and Ticker or Trading Symbol
SIMMONS FIRST NATIONAL CORP [SFNC]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
SIMMONS FIRST NATIONAL CORP., 501 MAIN STREET

3. Date of Earliest Transaction (Month/Day/Year)
01/19/2016

Director 10% Owner
 Officer (give title below) Other (specify below)
Chairman & CEO

(Street)
PINE BLUFF, AR 71601

4. If Amendment, Date Original Filed(Month/Day/Year)
01/21/2016

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

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. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D)	Price		
				Code	V	Amount	
SFNC					25,441	D	
SFNC					84,933	D	
SFNC					5,740	D	
SFNC					1,871	I	Trust
SFNC					178	D	
SFNC					4,050	I	By IRA
SFNC					4,750	I	IRA (Spouse)
SFNC					67	I	By IRA

Edgar Filing: SIMMONS FIRST NATIONAL CORP - Form 4/A

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)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Security (Instr. 3 and 4)	Amount or Number of Shares
Non-Qualified Stock Option	\$ 47.02	01/19/2016		A	4,548 (1)	01/19/2017 01/18/2026	Common	4,548 (1)
Non-Qualified Stock Option	\$ 47.02	01/19/2016		A	4,548 (1)	01/19/2018 01/18/2026	Common	4,548 (1)
Non-Qualified Stock Option	\$ 47.02	01/19/2016		A	4,549 (2)	01/19/2019 01/18/2026	Common	4,549 (2)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
MAKRIS GEORGE JR SIMMONS FIRST NATIONAL CORP. 501 MAIN STREET PINE BLUFF, AR 71601	X		Chairman & CEO	

Signatures

/s/ George Makris, Jr. by Piper P. Erwin
01/27/2016
**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).
- (1) Original number of shares 4,175 issued was incorrectly reported. Correct number of shares is 4,548.

Edgar Filing: SIMMONS FIRST NATIONAL CORP - Form 4/A

(2) Original number of shares 4,175 issued was incorrectly reported. Correct number of shares is 4,549.

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.