Edgar Filing: COLEMAN JOHN F - Form 4

Form 4											
January 11, 2 FORM		D STATES		ATTIES A			NGE C	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. STATEMENT OF Filed pursuant to Se			F CHAN Section 10 Public Ut	GES IN I SECUR 6(a) of the illity Hold	BENEF ITIES e Securit ling Con	ICIA ies E	xchange y Act of	NERSHIP OF See Act of 1934, f 1935 or Section		•	
See Instru 1(b).		30(h)	of the In	vestment	Compan	iy Ac	t of 194	.0			
(Print or Type R	Responses)										
COLEMAN JOHN F Symbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D 400 W. PARKWAY PLACE, SUITE 01/10/20 100				-				Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President			
			endment, Date Original nth/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 				
	ID, MS 39157							Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly 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 Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Commen				Code V	Amount		Price \$	(Instr. 3 and 4)			
Common Stock	01/10/2019			F	2,436	D	94.08 (1)	104,115 <u>(2)</u>	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 number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address			Relationships			
	Director 10% Own		Officer	Other		
COLEMAN JOHN F 400 W. PARKWAY PLACE SUITE 100 RIDGELAND, MS 39157			Executive Vice President			
Signatures						
Michael C. Donlon, Attorney-i Coleman	n-Fact for	John F.	01/11/2019			
<u>**</u> Signature of Reporting	ng 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).
- On January 10, 2019, 5,400 restricted shares vested and the Reporting Person instructed the Company to withhold 2,436 shares to cover (1) tax withholding obligations as permitted under the Company's 2004 Equity Incentive Plan, as amended.
- As of the date hereof, the Reporting Person's direct beneficial ownership includes 14,916 restricted shares granted under the Company's
- (2) 2013 Equity Incentive Plan, as amended, and the Company's 2004 Equity Incentive Plan, as amended, that have not yet vested. Does not include any restricted shares granted as annual or long-term incentive awards that are subject to continuing performance goals.

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.