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# Section 1: 4 (FORM 4 SUBMISSION)

### FORM 4

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

OMB APPROVAL						
OMB Number: 3235-0287						
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 Rep GLEASON GEORGE	2. Issuer l BANK OF						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director					
17901 CHENAL PARI	3. Date of Ear 11/05/2015		action	(Month/D	ay/Yea	ır)						
LITTLE ROCK, AR.	4. If Amendn	ent, Date (	Origina	al Filed (M	onth/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 Person					
	State)	(Zip)		Table I	- Non	-Derivati	ve Seci	quired, Disposed of, or Benefic	uired, Disposed of, or Beneficially Owned			
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year	Code (Instr. 8)	3. Transaction Code (Instr. 8)			of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				Code	V	Amount	(A) or (D)	Price		\ /	(Instr. 4)	
Common Stock		11/05/2015	Â	F	Â	84,000	D	\$51.37	994,340	D	Â	
Common Stock		Â	Â	Â	Â	Â	Â	Â	158,221	I	Shares held by spouse	
Common Stock		Â	Â	Â	Â	Â	Â	Â	4,800	I	Shares held in Trust for Adult Child	
Common Stock Â		Â	Â	Â	Â	Â	Â	Â	2,571,200	I	Shares held in Gleason Trust	
Common Stock		Â	Â	Â	Â	Â	Â	Â	1,932,631	I	Shares held in 401(k) at 11/5/2015	
Common Stock		Â	Â	Â	Â	Â	Â	Â	180,124	I	Shares held by Trust of which Mr. Gleason, his wife and descendants are beneficiaries	
Reminder: Report on a separ	rate line	for each class of se	curities beneficiall	y owned di	F	Persons v	who re	is form a	o the collection of informati- re not required to respond o rently valid OMB control nur	unless	SEC 1474 (9-02)	
					ι	ne iorm	uispia	ys a curr	entry valid Owib Control nur	iiber.		

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

1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Numb	er	and Expirati	on Date	Amo	ınt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secui	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) or							Reported	or Indirect	
						Dispo	sed						Transaction(s)	(I)	
						of (D)	)						(Instr. 4)	(Instr. 4)	
						(Instr.	3,								
						4, and	15)								
				Code	V	(A)	(D)	Date	Expiration	Title	Amount				
						, ,		Exercisable	Date		or				
											Number				

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			of		í l
			CI		i
			Shares		

## **Reporting Owners**

Donostino Como en Norre / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GLEASON GEORGE G II 17901 CHENAL PARKWAY P.O. BOX 8811 LITTLE ROCK, AR 72231-8811	ÂX	Â	Chairman & CEO	Â			

## **Signatures**

$\hat{A}$ /s/ George G Gleason	11/09/2015
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).

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. (Back To Top)