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#### Section 1: 4 (FORM 4 SUBMISSION)

# FORM 4

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

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SEC 1474 (9-02)

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 I GLEASON LINDA D	Person <del>*</del>	2. Issuer Nat BANK OF T			0	2		5. Relationship of Reporting Per (Check all ap X Director		
(Last) (First) 17901 CHENAL PARKWAY	P.O. BOX 881	1 3. Date of Earlie 11/05/2015	est Transa	ction (	Month/Da	y/Year)	)	Officer (give title below)	Other (speci	fy below)
(Street) LITTLE ROCK, AR 7223	31-8811	4. If Amendmen	it, Date O	riginal	Filed (Mo	onth/Day/	/ear)	6. Individual or Joint/Group Fili _X_Form filed by One Reporting Person Form filed by More than One Report		licable Line)
(City) (State)	(Zip)		Table I -	Non-	Derivativ	e Secui	ities Acqu	uired, Disposed of, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		4. Securi (A) or D (Instr. 3,	isposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form:	Beneficial
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(instr. 5 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	11/05/2015	Â	F	Â	84,000	D	\$51.37	5,683,095	I	Spouse's Dir/Indir Ownership
Common Stock	Â	Â	Â	Â	Â	Â	Â	158,221	D	Â

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)

	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	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	Transactio	n l	Numb	er	and Expiration	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	C	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	I	Deriva	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				5	Securi	ities			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security				1	Acqui	red			4)			Following	Direct (D)	
					(	(A) or							Reported	or Indirect	
					I	Dispo	sed						Transaction(s)	(I)	
						of (D)							(Instr. 4)	(Instr. 4)	
						Instr.									
					4	4, and	5)								
											Amount				
								D.	<b>.</b>		or				
								Date	Expiration Date	Title	Number				
								Exercisable	Date		of				
				Code V	7	(A)	(D)				Shares				

#### **Reporting Owners**

Barradine Ormen Name / Address		Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
GLEASON LINDA D 17901 CHENAL PARKWAY P.O. BOX 8811 LITTLE ROCK, AR 72231-881	ÂX	Â	Â	Â				

 11/09/2015 Date

## Signatures

/s/ Linda D Gleason

Signature of Reporting Person

https://s26.q4cdn.com/729473546/files/doc\_downloads/sec2/34457244.html

# **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)