### Edgar Filing: FIRST COMMUNITY BANCSHARES INC /NV/ - Form 4

#### FIRST COMMUNITY BANCSHARES INC /NV/

Form 4

March 22, 2016

## FORM 4

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

OMB Number: 3235-0287

5. Relationship of Reporting Person(s) to

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Expires: January 31, 2005

**OMB APPROVAL** 

Section 16. Form 4 or Form 5 obligations SECURITIES

Estimated average burden hours per response... 0.5

Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

STAFFORD WILLIAM P			Symbol FIRST COMMUNITY BANCSHARES INC /NV/ [FCBC]				CBC]	Issuer (Check all applicable)			
(Last) (First) (Middle) P. O. BOX 989			3. Date of Earliest Transaction (Month/Day/Year) 03/18/2016					_X_ Director 10% Owner Officer (give title Other (specify below)			
(Street)			4. If Amendment, Date Original Filed(Month/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			
BLUEFIELD, VA 24605  — Form filed by More than One Reporting Person											
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution	emed on Date, if 'Day/Year)	3. Transactic Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3,	(A) of (E	<b>)</b> )	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	03/18/2016			A	582	A	\$0	13,290	D		
COMMON STOCK								247,058	I	By Stafford Farms	
COMMON STOCK								10,350	I	By FCB Director Deferred Compensation Plan	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

7 Title and Amount of

Shares

9.785

**COMMON** 

**STOCK** 

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerci	sable and	/. Title and Am	iount of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if TransactionNumber I		Expiration Dat	te	Underlying Sec	urities		
Security	or Exercise		any Code of		of	(Month/Day/Y	rear)	(Instr. 3 and 4)		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivativ		e				
	Derivative				Securities					
	Security				Acquired					
	•				(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									A	
									Amount	
						Date Exercisable	Expiration Date	Title	or	
									Number	
									of	

Code V (A) (D)

**Reporting Owners** 

\$ 12.07

Relationships

Reporting Owner Name / Address

Director 10% Owner Officer Other

STAFFORD WILLIAM P

P. O. BOX 989 X

BLUEFIELD, VA 24605

## **Signatures**

**STOCK** 

**OPTION** 

William P. Stafford by: Robert L. Schumacher (His Attorney-in-Fact)

03/22/2016

12/19/2011 12/19/2021(1)

\*\*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) The options are subject to cliff vesting three years from the date of grant or at the retirement of the director, whichever comes first.

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.

Reporting Owners 2