#### **KANTOR I NORRIS**

Form 4

January 09, 2018

# FORM 4

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

**OMB** 3235-0287 Number:

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

See Instruction

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

burden hours per response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * KANTOR I NORRIS			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
		FIRST COMMUNITY BANCSHARES INC /NV/ [FCBC]			CBC]	(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)			_X_ Director Officer ( below)	give titlebelow	_ 10% Owner _ Other (specify			
P. O. BOX 989			01/08/2018					ociow)	ocio,	•• /	
	(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					
BLUEFIELD, VA 24605								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Ao	equired, Dispose	ed of, or Bene	ficially Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executi any	emed 3. 4. Securities on Date, if TransactionAcquired (A) or Code Disposed of (D) //Day/Year) (Instr. 8) (Instr. 3, 4 and 5)  (A) or		<b>)</b> )	Securities Ownership Indirect Beneficially Form: Owners		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
COMMON				Code V	Amount	(D)	Price	(		By FCB Director	
STOCK	01/08/2018			A	36	A	\$0	1,624	Ι	Deferred Compensation Plan	
COMMON STOCK								32,851	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control

(9-02)

### Edgar Filing: KANTOR I NORRIS - Form 4

#### number.

6. Date Exercisable and

7. Title and Amount of

**Underlying Securities** 

**STOCK** 

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

Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date

Security	or Exercise	any	Code	of	(Month/Day/Y	ear)	(Instr. 3 and 4)	
(Instr. 3)	Price of	(Month/Day/Year)	(Instr. 8)	Derivative	e			
	Derivative			Securities				
	Security			Acquired				
	·			(A) or				
				Disposed				
				of (D)				
				(Instr. 3,				
				4, and 5)				
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
STOCK	\$ 12.07				12/19/2011	12/19/2021(1)	COMMON	6,662

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
.t	Director	10% Owner	Officer	Other			
KANTOR I NORRIS							
P. O. BOX 989	X						
BLUEFIELD, VA 24605							

3. Transaction Date 3A. Deemed

## **Signatures**

1. Title of

Derivative

**OPTION** 

I. Norris Kantor by: Sarah W. Harmon (His Attorney-in-Fact) 01/09/2018

\*\*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.

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