#### Edgar Filing: ALABAMA NATIONAL BANCORPORATION - Form 4

#### ALABAMA NATIONAL BANCORPORATION

Form 4 July 06, 2007

# FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

**SECURITIES** 

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

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

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \*

PAGE G RUFFNER JR

Symbol

ALABAMA NATIONAL BANCORPORATION [ALAB]

2. Issuer Name and Ticker or Trading

(First) (Middle)

P.O. BOX 43327

(Street)

3. Date of Earliest Transaction

(Month/Day/Year) 07/03/2007

4. If Amendment, Date Original

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

Issuer

below)

\_X\_\_ Director

Applicable Line)

Officer (give title

BIRMINGHAM, AL 35243

(City) (State)

(Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8)

(Instr. 3, 4 and 5)

Code V Amount (D) Price

(A)

or

Beneficially Owned Following Reported Transaction(s)

5. Amount of

Securities

(Instr. 3 and 4)

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 (9-02)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)

1. Title of 3. Transaction Date 3A. Deemed Derivative (Month/Day/Year) Execution Date, if Conversion Security or Exercise any

5. Number of TransactionDerivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of 8. P **Underlying Securities** (Instr. 3 and 4)

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

6. Individual or Joint/Group Filing(Check

6. Ownership

Form: Direct

(I)

(Instr. 4)

(D) or Indirect Beneficial

(Check all applicable)

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

Indirect

Estimated average

burden hours per

1

Der

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	or (E (Is		Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						(Ins
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	07/03/2007		A		157.13		(2)	(2)	Common Stock	157.13	\$ 6
Phantom Stock Units	<u>(1)</u>	07/03/2007		A	V	59.37		(2)	(2)	Common Stock	59.37	\$ 6

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
PAGE G RUFFNER JR P.O. BOX 43327 BIRMINGHAM, AL 35243	X						

## **Signatures**

William E. Matthews V, by power of attorney 07/06/2007

\*\*Signature of Reporting Person

## **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).

Date

(1) The units convert to common stock on a 1-for-1 basis.

The phantom stock units were accrued under the Alabama National BanCorporation Plan for the Deferral of Compensation for Directors

(2) Who Are Not Employees of the Company and the Alabama National BanCorporation Plan for the Deferral of Compensation By Non-Employee Directors of the Subsidiary Banks and are to be settled in common stock at the end of the deferral period.

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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