Edgar Filing: Williams Amzie Thomas - Form 4

| Williams Am | zie Thomas | | | | | | | | | | |
|---|------------------------|---|---|--|----------------------------|-----------------|-----------|--|--------------------|--------------|--|
| Form 4 | | | | | | | | | | | |
| April 25, 201 | 8 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | OMB APPROVAL | | | |
| | UNITED | STATES S | | ITIES AN nington, l | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check this | | | | | | | | | Expires: | January 31, | |
| if no longer subject to STATEMENT OF CHANGES IN | | | | | IN BENEFICIAL OWNERSHIP OF | | | | Estimated average | | |
| Section 16 | Section 16. SECURITIES | | | | | | | | irs per | | |
| Form 4 or Form 5 | | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | | | | | | response 0.5 | | | |
| obligation | ~ ^ | | | | | | - | | | | |
| may contin | nue. Section 17(a | | | estment (| • | • • | | f 1935 or Sectio | 11 | | |
| See Instruction 1(b). | ction | J0(II) 0 | | csunch (| Joinpan | y Act | 01 19 | +0 | | | |
| 1(0). | | | | | | | | | | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| | | | | | | | | | | | |
| 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of | | | | | | f Reporting Per | son(s) to | | | | |
| | | | | FIZENS HOLDING CO /MS/ | | | | Issuer (Check all applicable) | | | |
| | | | | | | | | | | | |
| (Last) | (First) (M | fiddle) 3 | 3. Date of I | Earliest Tra | nsaction | | | _X_ Director | | 6 Owner | |
| | | | (Month/Da | - | | | | Officer (give below) | below) | er (specify | |
| 900 MAPLE | AVENUE | (| 04/23/20 | 18 | | | | | | | |
| | | | 4. If Amen | If Amendment, Date Original led(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | | | Filed(Montl | | | | | Applicable Line) _X_ Form filed by One Reporting Person | | | |
| | | | | | | | | | Aore than One Re | | |
| PHILADELI | PHIA, MS 39350 | | | | | | | Person | | 1 0 | |
| (City) | (State) (| (Zip) | Table | I - Non-De | erivative S | ecuri | ties Ac | quired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of | 2. Transaction Date | e 2A. Deem | ied | 3. | 4. Securi | ties | | 5. Amount of | 6. Ownership | 7. Nature of | |
| Security | (Month/Day/Year) | Execution | CodeDisposed of (D)//Day/Year)(Instr. 8)(Instr. 3, 4 and 5) | | | | | | Form: Direct | Indirect | |
| (Instr. 3) | | any (Month/D | | | | | | • | Indirect (I) Owner | Beneficial | |
| | | | | | | | 5) | | | (Instr. 4) | |
| | | | | | | (A) | | Reported | | | |
| | | | | | | or | | Transaction(s) (Instr. 3 and 4) | | | |
| | | | | Code V | Amount | (D) | Price | (IIIstr. 5 and 4) | | | |
| Common Stock | 04/23/2018 | | | Х | 275 | А | \$ 18 | 15,018 | D | | |
| | | | | | | | | | | | |

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)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|---|--|--------------------|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Option | \$ 18 | 04/23/2018 | | Х | 1,500 | 10/23/2008 | 04/23/2018 | Common Stock | 275 |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | | |
|---|------------|------------|---------|-------|------------|
| | Director | 10% Owner | Officer | Other | |
| Williams Amzie Thomas 900 MAPLE AVENUE PHILADELPHIA, MS 39350 | Х | | | | |
| Signatures | | | | | |
| Robert T. Smith, Attorney-in-F Williams | Fact for A | mzie Thoma | S | | 04/25/2018 |
| <u>**</u> Signature of Rep | | 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.

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