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FIRST COMMUNITY BANCSHARES INC /NV/

Form 4

September 05, 2013

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). September 05, 2013 OMB APPROVAL OMB Number: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 1940 1(b). OMB Number: Expires: SEXPIRED SECURITIES SEXPIRED SECURITIES OMB Number: Danuary 31 Expires: Sexpires: Sexpires:										
(Print or Type R 1. Name and Ac LILLY E ST					Relationship of Reporting Person(s) to ssuer (Check all applicable)					
(Last) P. O. BOX 9	(Last) (First) (Middle) 3. Date of 1 (Month/Date O. BOX 989 05/07/20						Director 10% Owner X Officer (give title Other (specify below) Chief Operating Officer			
BLUEFIELI	th/Day/Year) A _I				Individual or Joint/Group Filing(Check pplicable Line) K_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State) (Zi	p) Table	e I - Non-D	erivative (Secur	ities Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	(Month/Day/Year)	Fransaction Date 2A. Deemed onth/Day/Year) Execution Date, if any (Month/Day/Year)			ties A sed of 4 and (A) or (D)		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	05/07/2013		P	149	A	\$ 15.5556	2,704 (1)	D		
COMMON STOCK	05/07/2013		P	22	A	\$ 17.9473	348	D		
COMMON STOCK							6,323.959 (2)	I	By Employee Stock Ownership & Savings Plan	

7,050

I

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COMMON By 401(K) STOCK Wrap

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

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SEC 1474

(9-02)

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Transaction Date 3A. Deemed 4. 5. 6. Date Exercisable and Onth/Day/Year) Execution Date, if any Code of (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			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	\$ 19.8					12/31/1999(3)	<u>(4)</u>	COMMON STOCK	7,550.22
STOCK OPTION	\$ 16					12/31/2000(3)	<u>(4)</u>	COMMON STOCK	0.22
STOCK OPTION	\$ 13.94					12/31/2001(3)	<u>(4)</u>	COMMON STOCK	2,156.22
STOCK OPTION	\$ 24.65					12/31/2002(3)	<u>(4)</u>	COMMON STOCK	7,550.22
STOCK OPTION	\$ 29.15					12/31/2003(3)	<u>(4)</u>	COMMON STOCK	7,550.22

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LILLY E STEPHEN P. O. BOX 989 BLUEFIELD, VA 24605

Chief Operating Officer

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Signatures

E. Stephen Lilly by: Robert L. Schumacher (His Attorney-in-Fact)

09/05/2013

**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) IRA
- (2) Shares increased due to nondiscretionary company contribution and allocation under 401(k) plan.
- (3) Stock options vest and become exercisable in seven equal annual installments beginning with the date listed.
- Stock options are exercisable until 5 years after retirement at or after age 62, disability or death. If employment is terminated other than by retirement at or after 62, disability or death vested options must be exercised within 90 days after the effective date of termination. Any option not exercised within such period shall be deemed cancelled.

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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