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

#### FIRST COMMUNITY BANCSHARES INC /NV/

Form 4

**STOCK** 

**COMMON** 

November 05, 2013

<b>FORM</b>	1								APPROVAL	
Washington, D.C. 20549							OMB Number:	3235-0287		
Check this								Expires:	January 31,	
subject to Section 16 Form 4 or	Section 16.				GES IN BENEFICIAL OWNERSI SECURITIES				Estimated average burden hours per response 0.5	
Form 5 obligations may continue See Instruction 1(b).	nue. Section 17(a) of the		ility Hold	ing Com	pany	Act of	1935 or Section	n		
(Print or Type Re	esponses)									
Mills Gary R Syn			2. Issuer Name <b>and</b> Ticker or Trading Symbol FIRST COMMUNITY				5. Relationship of Reporting Person(s) to Issuer			
		ANCSHARES INC /NV/ [FCBC]				(Check all applicable)				
(Last)	(First) (Middle)	(Month/Da	-	nsaction			Director _X_ Officer (give below)		% Owner ther (specify	
P. O. BOX 98	89	11/01/20	013					President		
	(Street)		ndment, Dat th/Day/Year)	_			6. Individual or Jo Applicable Line) _X_ Form filed by G	One Reporting 1	Person	
BLUEFIELD	), VA 24605						Form filed by M Person	More than One I	Reporting	
(City)	(State) (Zip)	Table	e I - Non-Do	erivative S	Securi	ties Acq	uired, Disposed of	f, or Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. 1 (Month/Day/Year) Exect any (Month)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Indirect y Form: Beneficial Direct (D) Ownership or Indirect (I) n(s) (Instr. 4)			
COMMON			Code V	Amount	(D)	Price	(Instr. 3 and 4)		D 401(1)	
COMMON STOCK	11/01/2013		P	100	A	\$ 16.1	4,600	I	By 401(k) Wrap Plan	
COMMON STOCK	11/04/2013		P	100	A	\$ 16.45	4,700	I	By 401(k) Wrap Plan	
COMMON STOCK							5,094	D		
COMMON STOCK							1	D (1)		

Ву

Stock

Employee

5,331.576

I

Ownership & Savings Plan

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.

SEC 1474 (9-02)

8. De Sec (In

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

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	Execution Date, if any	4. Transaction	of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Derivative Securities 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 OPTION	\$ 13.94					12/31/2001(2)	(3)	COMMON STOCK	233
STOCK OPTION	\$ 24.65					12/31/2002(2)	(3)	COMMON STOCK	865
STOCK OPTION	\$ 29.15					12/31/2003(2)	(3)	COMMON STOCK	3,025

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Toporoug o water tune, returnos	Director	10% Owner	Officer	Other			
Mills Gary R							
P. O. BOX 989			President				
BLUEFIELD, VA 24605							

## **Signatures**

Gary R. Mills by: Robert L. Schumacher (His Attorney-in-Fact) 11/05/2013

\*\*Signature of Reporting Person Date

Reporting Owners 2

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### **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) Owned jointly with spouse.
- (2) 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
- (3) 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.