RENASANT CORP Form 4/A March 06, 2014

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

OMB APPROVAL

3235-0287 Number: January 31, Expires:

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0.5

burden hours per response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

1(b).

Common

Stock

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

| 1. Name and A FOY JOHN | Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | |
|--------------------------------------|---|----------------------------------|-------------|--|---|--|---|
| ~ \ | | RENASANT CORP [RNST] | | | | | |
| (Last) | (First) (M | iddle) 3. Date of | Earliest Tr | ansaction | | | |
| | (Month/D | (Month/Day/Year) | | | | 6 Owner | |
| P. O. BOX 7 | 02/20/20 | 02/20/2014 | | | ve titleOth below) | er (specify | |
| | 4. If Ame | 4. If Amendment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | |
| | ` | Filed(Month/Day/Year) 02/21/2014 | | | Applicable Line) _X_ Form filed by One Reporting Person | | |
| TUPELO, M | | | | Form filed by More than One Reporting Person | | | |
| (City) | (State) (Z | Zip) Tabl | e I - Non-D | erivative Securities A | equired, Disposed | of, or Beneficia | lly Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Code | 4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 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.

Reported

Transaction(s) (Instr. 3 and 4)

 $25,152 \frac{(1)}{2}$

D

(A)

Code V Amount (D) Price

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

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| | . Title of | 2. | 3. Transaction Date (Month/Day/Year) | | 4. | 5. | 6. Date Exerc | | 7. Title and | 8. Price of | 9. Nu Derix |
|---|-------------------------------------|---|--------------------------------------|---|---------------------------------|--|---------------------|--------------------|--|--------------------------------------|---|
| 5 | Derivative Security Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transacti Code (Instr. 8) | orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | s I | | Amount of Underlying Securities (Instr. 3 and 4 | Derivative Security (Instr. 5) | Deriv Secur Bene Own Follo Repo Trans (Instr |
| | | | | | Code V | <i></i> | Date Exercisable | Expiration Date | Title Amour or Number of | er | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|
| FB | Director | 10% Owner | Officer | Other | | |
| FOY JOHN | | | | | | |
| P. O. BOX 709 | X | | | | | |
| TUPELO, MS 38802 | | | | | | |

Signatures

john Foy 03/06/2014

**Signature of Date
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).
- (1) On February 20, 2014 the reporting person arranged for the purchase of 1,000 shares of Renasant common stock through his broker. The trade was subsequently broken such that the reporting person never in fact purchased such shares.

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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