#### FIRST BANCSHARES INC /MS/

Form 4

October 23, 2015

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

January 31, 2005

Estimated average burden hours per

**OMB APPROVAL** 

response...

0.5

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

LIGHTSEY	CHARLES R		Symbol FIRST I [FBMS]	BANCSH	IARES I	NC /I		ssuer (Check	all applicable	e)	
(Last) (First) (Middle) 2216 OLD BAY SPRINGS RD		3. Date of Earliest Transaction (Month/Day/Year) 10/23/2015				_	X Director 10% Owner Officer (give title below) Other (specify below)				
LAUREL, M	(Street)  1S 39440			ndment, Da th/Day/Year	_	1	- -	o. Individual or Joi Applicable Line) X_ Form filed by Oo Form filed by Mo erson	ne Reporting Pe	erson	
(City)	(State)	(Zip)	Table	e I - Non-D	<b>Derivative</b>	Secur	ities Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Executi any	emed on Date, if /Day/Year)	Code (Instr. 8)	4. Securionor Dispo (Instr. 3,	sed of 4 and (A) or		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	10/23/2015			Р	100	A	\$ 16.49	49,587	I	Held in Edward Jones Custodian Disability Representative FBO Charles R Lightsey 401KPS	
COMMON STOCK	10/23/2015			P	800	A	\$ 16.4899	50,387	I	Held in Edward Jones Custodian Disability	

								Representative FBO Charles R Lightsey 401KPS
COMMON STOCK	10/23/2015	P	200	A	\$ 16.4	50,587	I	Held in Edward Jones Custodian Disability Representative FBO Charles R Lightsey 401KPS
COMMON STOCK	10/23/2015	P	400	A	\$ 16.472	50,987	I	Held in Edward Jones Custodian Disability Representative FBO Charles R Lightsey 401KPS

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 required to respond unless the form displays a currently valid OMB control number.

(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 Data (Month/Day/Year)	2 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	ate	7. Title Amou Under Securi (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Relationships **Reporting Owner Name / Address** 

Reporting Owners 2

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Director 10% Owner Officer Other

LIGHTSEY CHARLES R 2216 OLD BAY SPRINGS RD X LAUREL, MS 39440

### **Signatures**

Charles R 10/23/2015 Lightsey

\*\*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).

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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