

SIMMONS FIRST NATIONAL CORP
 Form 4
 June 01, 2007

FORM 4

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 Archer Kevin J

2. Issuer Name and Ticker or Trading Symbol
 SIMMONS FIRST NATIONAL CORP [SFNC]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 SIMMONS FIRST NATIONAL CORP., 501 MAIN STREET
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 05/31/2007

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
 Sr. VP

PINE BLUFF, AR 71603

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
SFNC				(A) or (D)	1,132	D	

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)

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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. Transaction Code (Instr. 8)	5. Number of 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)	8. Pr	
				Code	V	(A)	(D)	Title	Amount or Number of Shares	
Incentive Stock Option	\$ 24.5	05/23/2005		X		0		05/23/2005 05/23/2015	Common 404	\$ 2
Incentive Stock Option	\$ 24.5	05/23/2005		X		0		12/31/2005 05/23/2015	Common 606	\$ 2
Incentive Stock Option	\$ 26.19	05/22/2006		X		0		05/22/2007 05/20/2016	Common 200	\$ 2
Incentive Stock Option	\$ 26.19	05/22/2006		X		0		05/22/2008 05/20/2016	Common 200	\$ 2
Incentive Stock Option	\$ 26.19	05/22/2006		X		0		05/22/2009 05/20/2016	Common 200	\$ 2
Incentive Stock Option	\$ 26.19	05/22/2006		X		0		05/22/2010 05/20/2016	Common 200	\$ 2
Incentive Stock Option	\$ 26.19	05/22/2006		X		0		05/22/2011 05/20/2016	Common 200	\$ 2
Incentive Stock Option	\$ 28.42	05/31/2007		X		0		05/31/2008 05/31/2017	Common 220	\$ 2
Incentive Stock Option	\$ 28.42	05/31/2007		X		0		05/31/2009 05/31/2017	Common 220	\$ 2
Incentive Stock Option	\$ 28.42	05/31/2007		X		0		05/31/2010 05/31/2017	Common 220	\$ 2
Incentive Stock	\$ 28.42	05/31/2007		X		0		05/31/2011 05/31/2017	Common 220	\$ 2

Option

Incentive

Stock	\$ 28.42	05/31/2007	X	0	05/31/2012	05/31/2017	Common	220	\$ 2
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Option

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Archer Kevin J SIMMONS FIRST NATIONAL CORP. 501 MAIN STREET PINE BLUFF, AR 71603			Sr. VP	

Signatures

/s/ Kevin J. Archer by Piper P. Erwin	06/01/2007
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**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.