SIMMONS FIRST NATIONAL CORP

Form 4

September 23, 2008

FORM 4

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

OMB

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

3235-0287 Number: January 31, Expires: 2005

OMB APPROVAL

Form 4 or Form 5 obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

Estimated average burden hours per 0.5 response...

may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * MAKRIS GEORGE JR | | | 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer | | | |
|------------------------------------------------------------|---------|---------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------------------|--|--|--|
| | | SIMMONS FIRST NATIONAL CORP [SFNC] | | (Check all applicable) | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | X Director 10% Owner Officer (give title Other (specify | | | |
| P.O. BOX 8866 | | | 09/19/2008 | below) below) | | | |
| (Street) | | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| | | | Filed(Month/Day/Year) | | | | |
| PINE BLUFF, AR 71611 | | | | Form filed by More than One Reporting Person | | | |

| (City) | (State) | (Zip) Ta | ble I - Non | -Derivati | ve Sec | urities A | equired, Disposed | of, or Benefici | ally Owned |
|--------------------------------------|--------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------------------|--------------|--------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------|-----------------|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | ution Date, if Transaction(A) or Disposed of (D) Code (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 Indirect Beneficial Ownership (Instr. 4) | |
| SFNC | 09/19/2008 | | Code V S | Amount 2,000 | (D) | Price \$ 35.5 | | D | |
| SFNC | 09/19/2008 | | S | 500 | D | \$ 35.49 | 8,900 | D | |
| SFNC | 09/19/2008 | | S | 500 | D | \$ 35.48 | 8,400 | D | |
| SFNC | 09/19/2008 | | S | 2,200 | D | \$ 35.75 | 0 | I | By IRA |
| SFNC | 09/19/2008 | | S | 2,403 | D | \$ 35.85 | 297 | I | IRA (Spouse) |
| SFNC | 09/19/2008 | | S | 200 | D | \$ | 97 | I | IRA |

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| | | | | | 35.86 | | | (Spouse) |
|------|------------|---|-----|---|-------------|-------|---|----------------------------------------|
| SFNC | 09/19/2008 | S | 800 | D | \$ 35.85 | 3,750 | I | Custodian for child (John) |
| SFNC | | | | | | 6,250 | I | Custodian for child (Nicholas) |
| SFNC | | | | | | 3,800 | I | Custodian for child (George III) |
| SFNC | | | | | | 500 | I | Nicholas |
| SFNC | | | | | | 2,000 | I | George, III |
| SFNC | | | | | | 1,000 | I | Trust (Brother) (1) |
| SFNC | | | | | | 1,000 | I | Trust (Sister) (1) |
| | | | | | | | | |

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)

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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. onNumber of Derivativ 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 Deri Secu (Inst |
|-----------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------|--------------------|---------------------------------------------------------------|----------------------------------------|--------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Incentive Stock Option | \$ 26.19 | 05/22/2006 | | X | 0 | 05/22/2006 | 05/20/2016 | Common | 1,000 | \$ 2 |
| Incentive Stock Option | \$ 28.42 | 05/31/2007 | | X | 0 | 05/31/2007 | 05/31/2017 | Common | 1,000 | \$ 2 |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MAKRIS GEORGE JR

P.O. BOX 8866 X

PINE BLUFF, AR 71611

Signatures

/s/ George Makris, Jr. by Piper P. Erwin

09/23/2008

**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) Trustee with no direct pecuniary interest of trust; adult brother and sister.

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.

Reporting Owners 3