### Edgar Filing: ALABAMA NATIONAL BANCORPORATION - Form 4

#### ALABAMA NATIONAL BANCORPORATION

Form 4 April 05, 2006

# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

See Instruction 1(b).

(Last)

1.Title of

Security

(Instr. 3)

P.O. BOX 598512

Form 5

obligations

may continue.

(Print or Type Responses)

1. Name and Address of Reporting Person \* STARNES WILLIAM STANCIL

(First)

2. Issuer Name and Ticker or Trading

3. Date of Earliest Transaction

Symbol

ALABAMA NATIONAL

BANCORPORATION [ALAB]

(Month/Day/Year) 04/03/2006

(Street) 4. If Amendment, Date Original

(Middle)

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

5. Relationship of Reporting Person(s) to

(Check all applicable)

Person

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

Issuer

below)

\_X\_\_ Director

Officer (give title

**BIRMINGHAM, AL 35259-8512** 

(City) (State) (Zip)

(Month/Day/Year)

2. Transaction Date 2A. Deemed 3. 4. Securities

> Execution Date, if Code (Instr. 8) (Month/Day/Year)

TransactionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Securities Beneficially Owned Following Reported

5. Amount of

Form: Direct (D) or Indirect Beneficial (I) (Instr. 4)

6. Ownership

Indirect Ownership (Instr. 4)

7. Nature of

10% Owner

Other (specify

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

(A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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.

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

1. Title of 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and 7. Title and Amount of 8. P TransactionDerivative Derivative (Month/Day/Year) Execution Date, if **Expiration Date Underlying Securities** Conversion Der (Month/Day/Year) (Instr. 3 and 4) Security or Exercise Code Securities Seci any

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (or Dispose (D) (Instr. 3, 4 and 5)	ed of					(Ins
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	(1)	04/03/2006		A		135.67		(2)	(2)	Common Stock	135.67	\$ 6
Phantom Stock Units	<u>(1)</u>	04/03/2006		A	V	59.23		(2)	(2)	Common Stock	59.23	\$ 6

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
STARNES WILLIAM STANCIL P.O. BOX 598512 BIRMINGHAM, AL 35259-8512	X						

### **Signatures**

William E. Matthews V, by power of attorney 04/04/2006

\*\*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) The units convert to common stock on a 1-for-1 basis.

The phantom stock units were accrued under the Alabama National BanCorporation Plan for the Deferral of Compensation for Directors

(2) Who Are Not Employees of the Company and the Alabama National BanCorporation Plan for the Deferral of Compensation By Non-Employee Directors of the Subsidiary Banks and are to be settled in common stock at the end of the deferral period.

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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