## Edgar Filing: RENASANT CORP - Form 4

DENIAGANTE CODI

Form 4										
May 03, 2017 FORM Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b).	4 UNITED s box er STATEM 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	<b>IENT OF C</b> suant to Sect a) of the Pub	Washingt HANGES SEC tion 16(a) o	ton, I IN B CURI of the Holdi	D.C. 205 ENEFI TIES Securiti ng Com	549 CIA es E	L OW	COMMISSION NERSHIP OF ge Act of 1934, f 1935 or Sectio 40	OMB Number: Expires: Estimated a burden hou response	
(Print or Type R	esponses)									
1. Name and Ad POTTS HUC	ddress of Reporting GH S JR	Syı	. Issuer Name mbol ENASANT				ıg	5. Relationship of Issuer	Reporting Pers	
(Last) 1104 WALN	(First) (N	(M	Date of Earlie onth/Day/Yea /01/2017		nsaction			X Director Officer (give below)	10%	Owner er (specify
	(Street)		If Amendmen ed(Month/Day/		e Original			6. Individual or Jo Applicable Line) _X_ Form filed by 0	One Reporting Pe	rson
KOSCIUSK	O, MS 39090							Form filed by M Person	Aore than One Re	porting
(City)	(State)	(Zip)	Table I - N	on-De	rivative S	Securi	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ate, if Tran Code 'Year) (Instr	saction e r. 8)	4. Securit n(A) or Di (D) (Instr. 3, 4)	spose	d of	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	05/01/2017		А		812 <u>(1)</u>	А	\$ 43.1	154,201	D	

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.

 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	2. Conversion	3. Transaction Date (Month/Day/Year)	Execution Date, if	4. Transacti		ber	6. Date Exercised Expiration D	ate	7. Titl Amou	int of	8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of Deriv Secur Acqu (A) of Dispo of (D) (Instr 4, and	rities ired or osed ) : 3,		i ear)	Under Secur (Instr.		Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Ac	ldress				
		Director	10% Owner	Officer	Other
POTTS HUGH S JR 1104 WALNUT GROVE F KOSCIUSKO, MS 39090	ROAD	Х			
Signatures					
Hugh S. Potts, Jr.	05/01	/2017			
<u>**Signature of</u> Reporting Person	Dat	e			
<b>—</b> • • • •	_				

## **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) Service-based restricted stock awarded under the 2011 Long Term Incentive Plan. These shares will vest April 24, 2018.

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.