Edgar Filing: WILSON BANK HOLDING CO - Form 4

WILSON BA Form 4 February 05,	ANK HOLDING 2016	CO									
FORM									OMB AF	PROVAL	
				RITIES AND EXCHANGE COMMISSION shington, D.C. 20549					OMB Number:	3235-0287	
Check thi if no long	er.								Expires:	January 31, 2005	
subject to	, SIAIEN	IENT OF	CHAN	GES IN BENEFICIAL OWN				NERSHIP OF	Estimated average		
Section 16. Form 4 or				SECURITIES					burden hours per		
Form 5		suant to Se	ection 16	5(a) of the	e Securit	ies F	xchange	e Act of 1934,	response	0.5	
obligation	¹⁸ Section $17($						•	1935 or Section	1		
may cont <i>See</i> Instru 1(b).	inue.			vestment	•	· ·	•				
(Print or Type F	Responses)										
1. Name and Address of Reporting Person _ 2. Issuer NORTON CHRISTY Symbol				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
•			WILSO	SON BANK HOLDING CO				(Check all applicable)			
(Last)	(First) (M	Aiddle) 3	3. Date of	Earliest Tra	ansaction			Director		Owner	
				th/Day/Year)				XOfficer (give titleOther (specify below) below)			
P O BOX 768 02/05/2			02/05/20	016				SRVP			
(Street) 4. If Amer			ndment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon LEBANON, TN 37088				onth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
	, IIN <i>37</i> 000							Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	(Instr. 3,	spose 4 and (A)	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	02/05/2016			Р	8	A	\$ 50.15	10,649	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)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	;	ate	Amou Under Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
		Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Person

Reporting Owner Name / Addre	255	Relationships						
	Director	10% Owner	Officer	Other				
NORTON CHRISTY P O BOX 768 LEBANON, TN 37088			SRVP					
Signatures								
Christy Norton	02/05/2016							
**Signature of	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.