## Edgar Filing: C & F FINANCIAL CORP - Form 4

|  | NCIAL CORP                             |   |  |  |  |   |  |   |  |              |  |  |
|--|--|---|--|--|--|---|--|---|--|--------------|--|--|
| Form 4<br>December 02  | 1, 2015                                |   |  |  |  |   |  |   |  |              |  |  |
| FODM A   |  |   |  |  |  |   |  |   | OMB AF   | OMB APPROVAL |  |  |
|  | UNITED                                 | Washington, D.C. 20549  |  |  |  |   |  |   | OMB<br>Number:   | 3235-0287    |  |  |
| Check th<br>if no long<br>subject to<br>Section 1<br>Form 4 o<br>Form 5  | 6.<br>Filed pu                         |   |  |  |  |   |  |   | Lanuary 31Expires:2005Estimated averageburden hours perresponse0.5   |              |  |  |
| obligations<br>may continue.Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940<br>1(b). |  |   |  |  |  |   |  |   |  |              |  |  |
| (Print or Type I   | Responses)                             |   |  |  |  |   |  |   |  |              |  |  |
| McKernon Bryan Edwin Symbol  |  |   | Name and                               |  |  |   | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                        |   |  |              |  |  |
| (Last)   | (First) (                              | Middle)   | 3. Date of Earliest Transaction (Check |  |  |   |  |   | k all applicable)  |              |  |  |
| (Month/E)1400 ALVERSER DRIVE11/27/2  |  |   | -                                      |  |  |   | Director 10% Owner<br>Officer (give titleX Other (specify<br>below)<br>President of Major Subsidiary |   |  |              |  |  |
|  |  |   |  | ndment, Date Original<br>hth/Day/Year) |  |   |  | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person |  |              |  |  |
| MIDLOTHIAN, VA 23113   |  |   |  |  |  | Form filed by More than One Reporting<br>Person |  |   |  |              |  |  |
| (City)   | (State)                                | (Zip)   | Tabl                                   | e I - Non-D                            | erivative                              | Secur   | ities Acq  | uired, Disposed of  | , or Beneficial  | ly Owned     |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Dat<br>(Month/Day/Year) | 2. Transaction Date 2A. Deemed<br>Month/Day/Year) Execution Date, if<br>any<br>(Month/Day/Year) |  |  | 4. Securi<br>on(A) or Di<br>(Instr. 3, | spose<br>4 and<br>(A)                           | d of (D)   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)          | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |              |  |  |
|  |  |   |  | Code V                                 | Amount                                 | or<br>(D)                                       | Price  | (Instr. 3 and 4)  |  |              |  |  |
| Common<br>Stock  | 11/27/2015                             |   |  | М                                      | 500                                    | А   | \$<br>37.99  | 13,995  | D  |              |  |  |
| Common<br>Stock  | 11/27/2015                             |   |  | S                                      | 500                                    | D   | \$ 39  | 13,495  | 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.

## Edgar Filing: C & F FINANCIAL CORP - Form 4

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | onof |     | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |  | 8. l<br>De<br>Sec<br>(In |
|---|---|---|---|--|------|-----|--|--------------------|---|--|--------------------------|
|   |   |   |   | Code V                                 | (A)  | (D) | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |                          |
| Common<br>Stock                                     | \$ 37.99  | 11/27/2015                              |   | М                                      | 4    | 500 | 12/20/2005   | 12/20/2015         | Common<br>Stock   | 500                                    |                          |

## **Reporting Owners**

| Reporting Owner Name / Addre  | 255        | Relationships |         |                               |  |  |  |  |  |
|---|------------|---------------|---------|-------------------------------|--|--|--|--|--|
| Reporting Owner Rune, Huar  | Director   | 10% Owner     | Officer | Other                         |  |  |  |  |  |
| McKernon Bryan Edwin<br>1400 ALVERSER DRIVE<br>MIDLOTHIAN, VA 23113 |            |               |         | President of Major Subsidiary |  |  |  |  |  |
| Signatures  |            |               |         |                               |  |  |  |  |  |
| /s/ Bryan E.<br>McKernon  | 12/01/2015 |               |         |                               |  |  |  |  |  |
| ******  | D.         |               |         |                               |  |  |  |  |  |

<u>\*\*</u>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.