Edgar Filing: GREER LOUIS E - Form 4/A

GREER LO Form 4/A January 23,												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box if no longer								Expires:	January 31,			
subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWNERSHIP OF			Estimated a	2005 verage				
Section		SECURITIES						burden hou	rs per			
Form 4 o Form 5		urguant to	Saction 1	6(a) of the	o Soouri	tion E	Trahana	$\sim \Lambda_{\rm ot} \circ f 1024$	response	0.5		
obligatio	-						-	e Act of 1934, f 1935 or Section	n			
may con	unue.			vestment	•	· ·	•		11			
<i>See</i> Instr 1(b).	uction	50(11)	, or the h	, estinent	. compu	19 1 10						
-(-).												
(Print or Type	Responses)											
1 Name and	Address of Reportin	ng Darson *			1 (5) 1			5 Deletionship of	Doporting Dor	on(a) to		
GREER LC				uer Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer					
bymbor				USTMARK CORP [TRMK]								
(Last)	(First)	(Middle)		f Earliest T	-		-]	(Chec	k all applicable)		
(Last)	(1130)	(windule)		Day/Year)	Talisaction			Director	10%	Owner		
				12/19/2011			Officer (give title Other (specify					
								below)	below) Freasurer &			
	(Street)		4 If Am	endment D	ate Origina	1		6 Individual or Ic	int/Group Filir	o(Check		
			nendment, Date Original onth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line)						
12/21/2			-				_X_ Form filed by One Reporting Person					
JACKSON	, MS 39205							Form filed by N Person	Iore than One Re	porting		
(City)	(State)	(Zip)				C.	•.••		D. C. I			
								uired, Disposed of		-		
1.Title of Security	2. Transaction Da			3. Transactiv	4. Securi			5. Amount of Securities	6. Ownership Form: Direct			
Security (Month/Day/Year) Execution Date, (Instr. 3) any			n Date, n	te, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			Beneficially	(D) or	Beneficial			
		(Month/I	Day/Year)	(Instr. 8)				Owned	Indirect (I)	Ownership		
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
common	10/10/2011						\$	10 207	D			
stock	12/19/2011			F	239 <u>(1)</u>	D	22.21	18,387	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 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. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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 / Address	Relationships						
	Director	10% Owner	Officer	Other			
GREER LOUIS E P. O. BOX 291 JACKSON, MS 39205			Treasurer &				
Signatures							
Louis E. Greer by: T. Harris Co POA	ollier, III,	()1/23/2012				
**Signature of Reporting Person	ı		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 number of shares withheld to satisfy the tax withholding obligation were incorrectly reported in the original Form 4 filed on December 21, 2011.

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.