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Wood Chest Form 4 January 26, 2 FORN Check th if no long subject to Section 1 Form 4 of Form 5 obligatio may cont <i>See</i> Instru 1(b).	2012 1 4 UNITED S is box ger 5 6. or 5 5 5 5 5 5 5 5 5 5 5 5 5	ENT OF suant to Se) of the P	Was CHAN ection 10 ublic Ut	GES IN GES IN SECUR	D.C. 20 BENEF ITIES e Securit ling Con	549 ICIA ties E	LOV Exchan y Act o	COMMISSIO VNERSHIP OF ge Act of 1934, of 1935 or Secti 940	N OMB Number: Expires: Estimated burden ho response.	ours per
Wood Ches (Last) 550 POST F	Address of Reporting F ter A Jr (First) (M RD., APT 607 (Street) ND, MS 39157	liddle)	Symbol TRUST 3. Date of (Month/D 12/31/20 4. If Ame Filed(Mon	D11 ndment, Da th/Day/Year	CORP [T ansaction te Origina	RMK 1	[]	Director X Officer (gi below) Exe 6. Individual or Applicable Line) _X_ Form filed by	eck all applicat we title O below) cutive Officer Joint/Group Fi One Reporting More than One	ole) % Owner ther (specify of ling(Check Person Reporting
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ed Date, if	3. Transactic Code (Instr. 8) Code V	4. Securi mAcquired Disposed (Instr. 3,	ties l (A) o l of (D 4 and (A) or	or))	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
common stock common stock	12/31/2011 01/24/2012			J	2,195 1,217			9,792 <u>(1)</u> 18,547	I D	company sponsored stock purchase plan

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	T '4	or		
						Exercisable	Date		Number		
					(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Wood Chester A Jr 550 POST RD., APT 607 RIDGELAND, MS 39157			Executive Officer of					
Signatures								
Chester A. Wood by: T. Harris POA	Collier, I	II,	01/26/2012					

Explanation of Responses:

**Signature of Reporting Person

* 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) Shares acquired thru company sponsored 401(k) program and company employee stock purchase plan.

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.

Date