## Edgar Filing: CREEKMORE JOHN - Form 4

| CREEKMO  | RE JOHN                                 |   |   |  |   |  |  |   |  |  |
|--|---|---|---|--|---|--|--|---|--|--|
| Form 4<br>April 01, 20   | 11                                      |   |   |  |   |  |  |   |  |  |
| FORM   | ЛЛ                                      |   |   |  |   |  |  | PPROVAL   |  |  |
| Washington, D.C. 20549   |   |   |   |  |   |  | N OMB<br>Number:   | 3235-0287   |  |  |
| Check th<br>if no lon<br>subject t<br>Section<br>Form 4 o  | ger <b>STATEN</b><br>16.                | HANGES IN<br>SECUI                                  | BENEF   | ICIAL OV   | Expires:<br>Estimated<br>burden hou<br>response | urs per  |  |   |  |  |
| Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |   |   |   |  |   |  |  |   |  |  |
| (Print or Type   | Responses)                              |   |   |  |   |  |  |   |  |  |
|  |   |   | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>RENASANT CORP [RNST]                 |  |   | 5. Relationship of Reporting Person(s) to Issuer   |  |   |  |  |
| (Last)   | (First) (                               |   |   | -  | 51]   | (Check all applicable)   |  |   |  |  |
| (N   |   |   | <ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>03/31/2011</li></ul> |  |   | X_ Director 10% Owner<br>Officer (give title Other (specify<br>below) below)   |  |   |  |  |
|  |   |   | If Amendment, Date Original<br>led(Month/Day/Year)  |  |   | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |  |   |  |  |
|  |   |   |   |  |   | Person   |  |   |  |  |
| (City)   | (State)                                 | (Zip)   | Table I - Non-  | Derivative   | Securities A                                    | cquired, Disposed  | of, or Beneficia   | lly Owned   |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date<br>any<br>(Month/Day/Y | Code<br>Year) (Instr. 8)  | 4. Securit<br>onAcquired<br>Disposed<br>(Instr. 3, 4 | (A) or<br>of (D)<br>4 and 5)<br>(A)<br>or       | Securities<br>Beneficially<br>Owned  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |   |   |   |  | (D) Price                                       |  |  |   |  |  |
| Reminder: Rej  | port on a separate line                 | e for each class o                                  | of securities bene  | Perso<br>inforn<br>requir                            | ns who res<br>nation cont<br>red to respo       | or indirectly.<br>spond to the colle<br>cained in this form<br>ond unless the fo<br>ntly valid OMB co  | n are not<br>rm  | SEC 1474<br>(9-02)  |  |  |

 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. Number of | 6. Date Exercisable and | 7. Title and Amount of | 8. Pr |
|-------------|-------------|---------------------|--------------------|------------|--------------|-------------------------|------------------------|-------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | orDerivative | Expiration Date         | Underlying Securities  | Deri  |
| Security    | or Exercise |                     | any                | Code       | Securities   | (Month/Day/Year)        | (Instr. 3 and 4)       | Secu  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Acquired (A) |                         |                        | (Inst |

number.

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|                  | Derivative<br>Security |            |      |   | or Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) |     |                     |                    |        |                                     |      |
|------------------|------------------------|------------|------|---|--|-----|---------------------|--------------------|--------|-------------------------------------|------|
|                  |                        |            | Code | v | (A)  | (D) | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of Shares |      |
| Phantom<br>Stock | <u>(1)</u>             | 03/31/2011 | Р    |   | 116.17   |     | <u>(1)</u>          | (1)                | Common | 116.17                              | \$ 1 |

## **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |         |       |  |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| I O                            | Director      | 10% Owner | Officer | Other |  |  |  |
| CREEKMORE JOHN                 |               |           |         |       |  |  |  |
| P. O. BOX 709                  | Х             |           |         |       |  |  |  |
| TUPELO, MS 38802               |               |           |         |       |  |  |  |
| Signatures                     |               |           |         |       |  |  |  |

John Creekmore 04/01/2011

\*\*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).
- The phantom stock units are accrued under the Renasant DSU Plan. The units are settled 100% in the Company's common stock upon the
- (1) reporting person's retirement or upon approved hardship reasons. The conversion price is one phantom stock unit for one share of the Company's common stock. Dividends are paid quarterly and reinvested on the phantom stock.

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.