## Edgar Filing: SOUTHSIDE BANCSHARES INC - Form 4

Eugai Filing. SOUTHSIDE BANGSHARES ING	- FOIII 4						
SOUTHSIDE BANCSHARES INC Form 4 June 20, 2016							
FORM 4 UNITED STATES SECURITIES AND EXCHANCE CON	OMB APPROVAL						
Check this box	Number: 3235-0287						
if no longer subject toSTATEMENT OF CHANGES IN BENEFICIAL OWNESection 16.SECURITIESForm 4 orFiled pursuant to Section 16(a) of the Securities Exchange A	RSHIP OF Estimated average burden hours per response 0.5						
obligations may continue. See Instruction 1(b). Section 17(a) of the Public Utility Holding Company Act of 19 30(h) of the Investment Company Act of 1940	35 or Section						
(Print or Type Responses)							
	Relationship of Reporting Person(s) to suer (Check all applicable)						
(Last) (First) (Middle) 3. Date of Earliest Transaction	Director 10% Owner						
(Month/Day/Year)	Officer (give titleOther (specify ow) below)         REGIONAL PRESIDENT, NORTH TX						
Filed(Month/Day/Year) Ap _X	<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>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) <b>Table I - Non-Derivative Securities Acquire</b>	ed, Disposed of, or Beneficially Owned						
Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Sec (Instr. 3) any Code Disposed of (D) Ben (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Ow Foll (A) Rep (A) or (Instr. 8)	Amount of urities6. Ownership Form: Direct7. Nature of Indirectneticially ned(D) orBeneficialnedIndirect (I)Ownership Iowinglowing oorted(Instr. 4)(Instr. 4)saction(s)str. 3 and 4)Sand 4						
Code V Amount (D) Price							
Stock 06/20/2016 F 139 D (1) 42,	597 D						
Common 06/08/2016 J 0.721 A (2) 92. Stock	979 I ESOP						
Common 11, Stock	206.26 (3) I IRA						
Common 632 Stock	2 I Trust						

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

## Edgar Filing: SOUTHSIDE BANCSHARES INC - Form 4

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact: Code (Instr. 8)	5. 6. Date Exercisable an ionNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Tit Amou Unde: Secur (Instr	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Carter Tim 1201 S BECKHAM AVE TYLER, TX 75701			REGIONAL PRESIDENT, NORTH TX			
Signatures						
TIMOTHY H. CARTER	06/20/201	6				

\*\*Signature of Reporting Date Person

## **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) Reflects restricted stock units (RSUs) 2015 grant received pursuant to dividend equivalent rights attached to RSUs held by the reporting person.
- (2) Amount includes allocation of shares received in connection with reinvestment of quarterly cash dividend.
- (3) Total reflects shares that were previously held in 401(k) transferred to IRA plan. Shares were transferred in kind.

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.