FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																		
1. Name and Address of Reporting Person* Fuller Michael D.						2. Issuer Name and Ticker or Trading Symbol ServisFirst Bancshares, Inc. [SFBS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 850 SHADES CREEK PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 12/15/2014									Office	r (give title belo	w)	Other	(specify belo	w)	
DID (D)	GHANG A	(Street)			4. If	Amendi	nent	, Date (Origi	nal	Filed(Mont	th/Day/	Year)		_X_ Form file	nal or Joint/O ed by One Repo	rting Perso	n	**	Line)
BIRMIN (City	GHAM, A	L 35209 (State)		(Zip)																
	Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)			Execut	2A. Deemed Execution Date, if			3. Transaction Code		4. Securiti		ties Acquired		5. Amount Beneficial	nt of Securities and Owned Following Transaction(s) and 4)		6. Owners Form: Direct (or Indir (I)	7. Na Indire Bene (D) Owne (Instr	ficial ership	
COMMO	N STOCE	ζ						Code	•	V	Amount	(D)	Pri		12,000	000		(Instr. 4	1	spouse
	ON STOCE														444,000			I	By corp own adul	oration ed by
СОММС	N STOCE	ζ	12/15	/2014				P			4,500	A	\$ 30.4 (1)	109	44,394			D		
COMMO	ON STOCE	ζ	12/16	/2014				P			10,000	A	\$ 30.4 (2)	17	54,394			D		
Reminder:	Report on a s	separate line	for each	n class of sec	curities l	peneficia	ılly o	owned d		Pe	rsons w	ho re in thi	s forn	n are	not requ	ction of inf ired to res OMB cont	spond u	nless	SEC 14	74 (9-02)
				Table II											ly Owned					
Derivative Security	Conversion Date		3. Transaction 3A. Deemed Execution Date Amonth/Day/Year) any			4.			5.		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Ti Amo Undo Secu	itle and ount of erlying irities r. 3 and	8. Price of Derivative Security (Instr. 5)		es I I I I I I I I I I I I I I I I I I I	Dwnership Form of Derivative Security: Direct (D) or Indirect I)	11. Natur of Indire Beneficia Ownersh (Instr. 4)
						Code	V	(A)	(D)	Da Ex	ate cercisable	Expi Date	ration	Title	Amount or Number of Shares					

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Reporting Owner Name / Address						

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/s/ Edison K. Woodie III, attorney-in-fact	12/16/2014			
**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 price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$30.370 to \$30.420, inclusive. The (1) reporting person undertakes to provide to ServisFirst Bancshares, Inc., any security holder of ServisFirst Bancshares, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in footnote (1) to this Form 4.
- The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$30.430 to \$30.498, inclusive. The (2) reporting person undertakes to provide to ServiFirst Bancshares, Inc., any security holder of ServiFirst Bancshares, Inc., or the staff of the Securities and Exchange commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in footnote (2) to this Form 4.

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.