# FORM 4

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

OMB APPR	OVAL				
OMB Number:	3235-0287				
Estimated average burden					
hours per response.	0.5				

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 Typ	e Responses	)																	
1. Name and Address of Reporting Person* FOSHEE WILLIAM M					2. Issuer Name and Ticker or Trading Symbol ServisFirst Bancshares, Inc. [SFBS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 5120 STRATFORD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2015								X Officer (give title below) Other (specify below)  EVP, CFO						
BIRMING	GHAM, A	(Street)		4. If A	mend	ment, I	Oate (	Original I	Filed(M	onth/Day/Y	ear)		_X_ For	m filed by C	ne Reporting I	p Filing(Check Person Reporting Person		ne)	
(City		(State)	(Zip)				Tal	ble I - No	n-Der	ivative S	ecurit	ies Acqui	red, Di	isposed o	of, or Benef	icially Own	ed		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	Exec any	2A. Deemed Execution Date, i any (Month/Day/Year		3. Co (In	(Instr. 8)		. Securities Acquired A) or Disposed of (D) Instr. 3, 4 and 5)		5. Amount of Securities F Owned Following Report Transaction(s)			eneficially	6. Ownership Form: Direct (D)	of Inc	7. Nature of Indirect Beneficial Ownership		
				(IVIO	IIII/D	ay/ 1 ca	1)	Code	V	Amount	(A) or (D)	Price	oi (I		or Indirect (I) (Instr. 4)				
СОММО	N STOCK		06/01/2015					S		2,025	D	\$ 35.15 (3)	5 202,320 D			D			
Reminder: F	Report on a so	eparate line for each	class of securities b	enefici	ally o	wned d	irect	P ir	ersor this	form are	not		to res	spond u		on contain		C 1474	(9-02)
			Table II							osed of, o		eficially ( rities)	Owned						
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Y		Date	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. , if Transaction N Code of S ear) (Instr. 8) D S A (// D D (i) (I			ative ities ired r sed	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		(Instr. 5) Be Ov Fo Re Tra		Owner Form of Deriva Securi Direct or Indi	ship of B of tive of ty: (ID) rect	Beneficia Ownersh (Instr. 4)			
				Code	· V	(A)	(D)	Date Exercisa	able	Expiration Date	on	Title		Amount or Number of Shares					
STOCK OPTION (RIGHT TO BUY)	\$ 8.33							Ü	Ŋ	02/16/2	2020	COMM STO		15,000		15,000	D		
STOCK OPTION (RIGHT TO BUY)	\$ 8.33							01/19/	2016	01/19/2	2021	COMM		7,500		7,500	D		
STOCK OPTION (RIGHT TO BUY)	\$ 10							02/21/	2017	02/21/2	2022	COMM STO		7,500		7,500	D		

## **Reporting Owners**

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

FOSHEE WILLIAM M			
5120 STRATFORD ROAD		EVP, CFO	
BIRMINGHAM, AL 35242			

### **Signatures**

/s/ Davis S. Mange, attorney-in-fact	06/02/2015
**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).
- (1) 3,000 stock options exercisable on 2/16/2014 and 12,000 stock options exercisable on 2/16/2015.
- (2) These shares were sold pursuant to a Rule 10b5-1 plan.
- The price reported in column 4 is a weighted average price. The shares were sold in multiple transactions ranging in price from \$35.14 to \$35.19, inclusive. The reporting person undertakes (3) to provide 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 sold at each price set forth in this footnote (3) 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.