Edgar Filing: JAMES KAREN - Form 4

| JAMES KAF Form 4 | | | | | | | | | | | |
|---|---|------------------|---|---|---------------------------|----------------|----------------|---|--|------------------------|--|
| October 19, 2 | ГЛ | STATES | SECUR | TIFS A | ND EX(| сна | NGE C | OMMISSION | | PROVAL | |
| | | TAILS | | shington, | | | | 01011011551010 | OMB Number: | 3235-0287 | |
| Subject to Section 16. Form 4 or Form 5 Filed pursuar | | suant to S | Section 1 | SECUR 6(a) of the | ITIES e Securit | ies E | Act of 1934, | Expires: January 3 Estimated average burden hours per response | | | |
| may conti <i>See</i> Instru 1(b). | inue. Section 17(a | | | vestment | • | · · | | 1935 or Section 0 | n | | |
| (Print or Type R | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> JAMES KAREN | | | 2. Issuer Name and Ticker or Trading Symbol BANCFIRST CORP /OK/ [BANF] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (N | liddle) | | | | / [D / | 7141 .] | (Chec | k all applicable |) | |
| 101 N. BROADWAY | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/17/2012 | | | | | Director 10% Owner X_ Officer (give title Other (specify below) EVP & Regional Executive | | | |
| | | | | nendment, Date Original onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| OKLAHOM | IA CITY, OK 73 | 02 | | | | | | Person | lore than One Re | porting | |
| (City) | (State) | Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | | | (Instr. 3, | (A) or | d of (D) 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect Beneficial | |
| Common | 10/17/2012 | | | Code V | | , í | Price \$ | 11 114 | D | | |
| Stock | 10/17/2012 | | | М | 6,364 | A | 15.25 | 11,114 | D | | |
| Common Stock | 10/17/2012 | | | М | 8,636 | А | \$ 15.25 | 19,750 | D | | |
| Common Stock | 10/17/2012 | | | S | 8,636 | D | \$ 44.5 | 11,114 | D | | |
| Common Stock | | | | | | | | 30,163.462 | I | ESOP | |
| Common Stock | | | | | | | | 3,364.423 | Ι | By Spouse | |

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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 Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amour Underlying Securit (Instr. 3 and 4) | |
|---|---|---|---|--|---|--|--------------------|--|---------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amo or Num of Share |
| Non-Qualified Stock Option (right to buy) | \$ 15.25 | 10/17/2012 | | М | 6,364 | 10/05/2003 | 10/05/2014 | Common Stock | 6,3 |
| Non-Qualified Stock Option (right to buy) | \$ 15.25 | 10/17/2012 | | М | 8,636 | 10/05/2003 | 10/05/2014 | Common Stock | 8,6 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|------------|--------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| JAMES KAREN 101 N. BROADWAY OKLAHOMA CITY, OK 73102 | | | EVP & Regional Executive | | | | |
| Signatures | | | | | | | |
| By: Randy Foraker For: Karen James | | 10/19/2012 | | | | | |
| **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).

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.