Brown David D Form 4 October 31, 2017

## FORM 4

### OMB APPROVAL

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Washington, D.C. 20549

Expires: January 31, 2005

SECURITIES

Symbol

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

BANCSHARES INC /NV/ [FCBC]

FIRST COMMUNITY

1(b).

(Print or Type Responses)

Brown David D

1. Name and Address of Reporting Person \*

(Last) (First) (Middle)			, , , , , , , , , , , , , , , ,	3. Date of Earliest Transaction (Month/Day/Year)				DirectorX Officer (given	ve titleO	0% Owner ther (specify				
P. O. BOX 989				•	10/30/2017					below) below) Chief Financial Officer				
		(Street)			Amendment, Date Original  Month/Day/Year)				6. Individual or Joint/Group Filing(Check					
	BLUEFIELD	(Street)  D, VA 24605 (State) (Zip)  2. Transaction Date 2A. D. Exect any (Month/Day/Year)  10/30/2017		Filed(Month	, , , , , , , , , , , , , , , , , , ,				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
(0', ) (0, , ) (7', )														
	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
	1.Title of Security (Instr. 3)	ty (Month/Day/Year) Ex 3) any		Execution Date, if	3. Transaction Code (Instr. 8)	4. Securi or(A) or Di (D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)				
	COMMON STOCK	10/30/2017			P	100	A	\$ 29.5	1,350	I	By 401K Wrap			
	COMMON STOCK								9,691	D				
	COMMON STOCK								2,310.272	I	By Employee Stock Ownership & Savings Plan			
									1,300	I	IRA			

#### COMMON STOCK

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.

SEC 1474

(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.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumbe		Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Brown David D P. O. BOX 989 BLUEFIELD, VA 24605

Chief Financial Officer

### **Signatures**

David D. Brown by: Sarah W. Harmon (His Attorney-in-Fact)

10/31/2017

\*\*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.

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