BANCFIRST CORP /OK/

Form 4

February 24, 2016

FORM 4

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

OMB Number:

Expires:

3235-0287

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, 2005

Section 16. Form 4 or Form 5 obligations may continue.

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

burden hours per response...

Estimated average

See Instruction

30(h) of the Investment Company Act of 1940

0.5

OMB APPROVAL

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * McMillan Marion | | | 2. Issuer Name and Ticker or Trading Symbol BANCFIRST CORP /OK/ [BANF] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|---|-----------|----------|--|--|--|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | (===== un uppneuele) | | | |
| | | | (Month/Day/Year) | Director 10% Owner | | | |
| 101 N. BROADWAY | | | 02/24/2016 | Officer (give title _X_ Other (specify below) Regional Executive | | | |
| (Street) | | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check | | | |
| | | | Filed(Month/Day/Year) | Applicable Line) _X_ Form filed by One Reporting Person | | | |
| OKLAHOM | A CITY, O | K 73102 | | Form filed by More than One Reporting Person | | | |

| (City) | (State) | (Zip) Tab | le I - Non- | Derivativ | e Secu | rities Acqui | red, Disposed of, | or Beneficial | y Owned |
|--------------------------------------|---|---|---|-----------|--------|---|---|---------------|---------|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. 4. Securities Acquired (A) Transactiom Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price | | | 5. Amount of Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | 02/24/2016 | | M | 200 | A | \$ 18.813 | 200 | D | |
| Common Stock | 02/24/2016 | | S | 200 | D | \$ 54.2436 | 0 | D | |
| Common Stock | | | | | | | 3,498.774 | I | ESOP |

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

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number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| De Se | Title of erivative ecurity astr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Transactic Code (Instr. 8) | e Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. P Der Sec (Ins |
|----------|---|---|--------------------------------------|---|----------------------------------|--------------|-----|--|--------------------|---|--|----------------------------|
| | | | | | Code V | ŕ | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| St O | Q - cock ption Right to uy) | \$ 18.813 | 02/24/2016 | | M | : | 200 | 02/27/2008 | 02/27/2016 | Common Stock | 200 | \$ 1 |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

McMillan Marion

101 N. BROADWAY Regional Executive

OKLAHOMA CITY, OK 73102

Signatures

By: Randy Foraker For: Marion
McMillan

02/24/2016

**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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