Edgar Filing: SOUTHWEST GEORGIA FINANCIAL CORP - Form 4

| SOUTHWEST Form 4 July 24, 2015 | Γ GEORGIA FIN | IANCIAL COR | р | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------------------------------------------------------|--|
| FORM | Л | | | | | | OMB AF | PPROVAL | |
| | UNITED S | | RITIES AN shington, D | | | COMMISSION | OMB Number: | 3235-0287 | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. STATEMENT OF CHANGES I SECU Filed pursuant to Section 16(a) of Section 17(a) of the Public Utility H | | | | CS IN BENEFICIAL OWNERSHIP OF ECURITIES) of the Securities Exchange Act of 1934, y Holding Company Act of 1935 or Section tment Company Act of 1940 | | | | January 31, Expires: 2005 Estimated average burden hours per response 0.5 | |
| (Print or Type Re | esponses) | | | | | | | | |
| REEVES ROY H Syn | | Symbol SOUTI | r Name and T HWEST GE CIAL COR | ORGIA | ading | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) (Mi | | f Earliest Tran Day/Year) 015 | saction | | _X_Director10% Owner Officer (give titleOther (specify below)below) | | | |
| | (Street) | Street) 4. If Amen Filed(Month | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (State) (Z | Zip) Tab | le I - Non-Der | ·ivative Se | curities Acc | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | 3. Transaction Code | 4. Securit n Acquired Disposed (Instr. 3, | ies (A) or of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of | |
| Southwest Georgia Financial Corp (<u>1)</u> | 07/24/2015(1) | | P <u>(1)</u> (1) | 385 <u>(1)</u> | | 34,273 | D | | |

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) | 4. Transactio Code (Instr. 8) | 5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-------|----------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| REEVES ROY H | | | | | | | |
| | Х | | | | | | |
| Signatures | | | | | | | |

Roy H Reeves By TammyLane AIF07/24/2015

**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) Director/Officer Stock Purchase Plan shares purchased during second quarter 2015 at an average price of \$14.08993 per share.

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.