**BYARS DAVID** Form 4 June 13, 2006

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

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response...

**OMB APPROVAL** 

if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

See Instruction

Check this box

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

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person ** BYARS DAVID			2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer
			NBC CAPITAL CORP [NBY]	(Check all applicable)
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	
			(Month/Day/Year)	X Director 10% Owner
P. O. BOX 1187			06/12/2006	$\frac{\text{Officer (give title } }{\text{below})} \text{Other (specify}$
	(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
STARKVIL	LLE, MS 3970	50		Form filed by More than One Reporting Person
(City)	(State)	(Zip)	Table I - Non-Derivative Securities	Acquired, Disposed of, or Beneficially Own
1 Title of	2 Transactio	n Date 2A D	eemed 3 4 Securities Acqui	ired 5 Amount of 6 7 Natur

(City)	(State) (Z	Table	I - Non-Deri	ivative S	ecuriti	es Acqu	ired, Disposed of	f, or Beneficia	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code ( (Instr. 8)	4. Securit (A) or Di (Instr. 3,	sposed	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 Indirect Beneficial Ownership (Instr. 4)
NBC Capital Corporation common stock							7,633	I	Profit Sharing Plan
NBC Capital Corporation common stock							600	I	David Byars IRA
NBC Capital Corporation common stock							1,337	I	By Neda Byars Revocable Trust

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NBC Capital Corporation common stock							4,666	D	
NBC Capital Corporation common stock							2,882	I	By wife
NBC Capital Corporation common stock							866	I	Custodial Acct for Daughter
NBC Capital Corporation common stock							778	I	Byars Family Exempt Trust
NBC Capital Corporation common stock							266	I	Byars Furniture Investment
NBC Capital Corporation common stock							1,333	I	Byars Marital Income Trust
NBC Capital Corporation common stock							200	I	By Wife's IRA
NBC Capital Corporation common stock	06/12/2006	06/12/2006	P	250	A	\$ 20.55	600	I	Steve Risher Trust

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.

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(9-02)

# $\label{thm:convertible} \textbf{Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned} \\ \textit{(e.g., puts, calls, warrants, options, convertible securities)}$

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration Date	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	/e	Securities	(Instr. 5)	Bene
	Derivative				Securities	S	(Instr. 3 and 4)		Own
	Security				Acquired	i			Follo

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(A) or Disposed of (D) (Instr. 3, 4, and 5)

Code V (A) (D) Date Expiration Title Amount Exercisable Date or

Number of Shares

### **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

BYARS DAVID
P. O. BOX 1187
X

STARKVILLE, MS 39760

### **Signatures**

David C. Byars 06/12/2006

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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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<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).