FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| 0, | | | ., | ~- | • |
|-----------|--------|------|----|----|---|
| shington, | D.C. 2 | 0549 | | | |

| OMB APPROVAL | | | | | | | | | |
|-------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average | burden | | | | | | | | |

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* HOLLAND NEAL A JR | | | | 2. Issuer Name and Ticker or Trading Symbol RENASANT CORP [RNST] | | | | | | | 5. Relationship of Report (Check all applicable) X Director | | | rting Person(s) to Issuer 10% Owner | | | |
|--|---|--|--|--|---|-------|--|--|--|---|---|--|--|---|---|-------------|-----------------------------------|
| (Last) | (Fir | rst) (f | Middle) | 104 | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/07/2023 | | | | | | | | | Oth belo | er (specify w) |
| P.O. BOX 709 | | 4. If . | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| (Street) |) MS | S 3 | 8802 | | | | | | | | | | X Form filed by One Reporting I Form filed by More than One Person | | | | |
| (City) | (St | ate) (2 | Zip) | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | |
| | | | Check this box to ind satisfy the affirmative | | | | | dicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to e defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | |
| | | Table | I - No | on-Deriva | tive | Secui | rities Ac | quire | d, Di | sposed of | , or Be | enefici | ally Owr | ned | | | |
| Date | | 2. Transacti Date (Month/Day | Execution Date | | tion Date, | | | s Acquired (A) or f (D) (Instr. 3, 4 and | | Securitie Beneficia | 5. Amount of Securities Beneficially Owned Following | | ership Direct ndirect tr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | v | Amount | (A) or (D) | Price | Transact (Instr. 3 | ion(s) | n(s) i 4) | | (msu. 4) | |
| Common Stock | | 04/07/20 | 2023 | | | P | | 500 | A | \$30 | 68, | 68,642 | |) | | | |
| Common | Stock | | | | | | | | | | | | 7,2 | 248 |] | I | Holland Limited Partnership |
| Common Stock | | | | | | | | | | | 152 | 152,146 | | I | Holland Holdings | | |
| Common Stock | | | | | | | | | | | 2,0 | 000 | | I | Trust | | |
| Common Stock | | | | | | | $oxed{oxed}$ | | | | 1: | 50 | | I | Children | | |
| Common Stock | | | | | | | | | | 1,303 | |] | I | Spouse | | | |
| 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) | Execu if any | eemed Ition Date, h/Day/Year) | 4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title Amoun Securit Underly Derivat Securit 3 and 4 | it of ties ying tive ty (Instr. | Derivative Security (Instr. 5) Ben Own Foll Rep | | ities Form: icially Direct (or Indiving (I) (Inst ted action(s) | | Beneficial Ownership ect (Instr. 4) | | |
| | | | | | Code | v | (A) (D) | Date Exer | cisable | Expiration Date | | Amount or Number of Shares | | | | | |

Explanation of Responses:

Remarks:

Colton Wages, Attorney in

** Signature of Reporting Person

<u>Fact</u>

04/07/2023

Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $^{^{\}star}$ 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).