SECURITIES AND EXCHANGE COMMISSION

FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2013-01-28** | Period of Report: **2013-01-28** | SEC Accession No. 0001484949-13-000004

(HTML Version on secdatabase.com)

REPORTING OWNER

WILLIAMS JOHN C

CIK:1211689

Type: 4 | Act: 34 | File No.: 001-34821 | Film No.: 13550623

Mailing Address C/O JACKSONVILLE SAVINGS BANK 1211 WEST MORTON AVE JACKSONVILLE IL 62650

ISSUER

Jacksonville Bancorp, Inc.

CIK:1484949| IRS No.: 000000000 | State of Incorp.:MD | Fiscal Year End: 1231 SIC: 6035 Savings institution, federally chartered

Mailing Address 1211 WEST MORTON AVENUE JACKSONVILLE IL 62650 Business Address 1211 WEST MORTON AVENUE JACKSONVILLE IL 62650 (217) 245-4111

FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address WILLIAMS JO		on <u>*</u>	2. Issuer Name and Ticker or Trading Symbol Jacksonville Bancorp, Inc. [JXSB]	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/28/2013	Officer (give titleOther (specify below) below) Senior V.P. & Trust Officer				
208 OAK STREE	ET, P. O. BOX 320)						
CHAPIN, IL 626	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	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)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)	2. Transaction Date (Month/ Day/Year)	2A. Deemed Execution Date, if any	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		(Month/ Day/Year)	Code	v	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)		
Jacksonville Bancorp, Inc. Common Stock	01/28/2013		<u>P</u>		200	A	\$18	9,700	D		
Jacksonville Bancorp, Inc. Common Stock								9,826	I	By 401(k)	
Jacksonville Bancorp, Inc. Common Stock								99	I	By ESOP	
Jacksonville Bancorp, Inc. Common Stock								10,000	I	By IRA	
Jacksonville Bancorp, Inc. Common Stock								950	I	By Company	

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

	3. Transaction Date (Month/ Day/Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Transac Code (Instr. 8		of Deriv Secu Acqu (A) or Dispo of (D) (Instr	rative rities ired r osed) : 3,	6. Date Exerci Expiration Dat Day/Year)		7. Title and Securities L Derivative S (Instr. 3 and	Inderlying Security	of Derivative Security (Instr. 5)	Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					4, an	,								
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or				

								Number of Shares			
Stock Options	\$15.65				04/24/2013	04/24/2022	Common Stock	8,500 ⁽¹⁾	8,500 ⁽¹⁾	D	

Explanation of Responses:

1. Stock Options vest at a rate of 20% per year commencing on April 24, 2013.

Signatures

John C. Williams01/28/2013** Signature of Reporting PersonDate

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

- * 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.

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.