Adair J Aubrey Form 5 January 25, 2005

FORM 5

OMB APPROVAL

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

OMB 3235-0362 Number:

2005

1.0

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

Check this box if

January 31, Expires: Estimated average

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL burden hours per OWNERSHIP OF SECURITIES response...

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported

30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1. Name and Address of Reporting Person * Adair J Aubrey			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) t Issuer			
			NBC CAPITAL CORP [NBY]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended	(Check all applicable)			
			(Month/Day/Year)	Director 10% Owner			
			12/31/2004	_X_ Officer (give title Other (speci-			
P. O. BOX 1187				below) below)			
1. O. DOM	1107			Vice President			
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Reporting			
			Filed(Month/Day/Year)				
			• · · · · · · · · · · · · · · · · · · ·	(check applicable line)			

STARKVILLE, MSÂ 39760

X Form Filed by One Reporting Person _ Form Filed by More than One Reporting Person

(City)	(State) (Z	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 (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit (A) or Dis (D) (Instr. 3, 4)	sposed	of	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (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	12/31/2004	Â	J	3.7869	A	\$ 0	65.4432	I	By Employee Stock Plan
NBC Capital Corporation common stock	12/31/2004	Â	J	0.1039	A	\$ 0	1.8029	I	By wife Employee Stock Plan

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.

SEC 2270 (9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option Right to Buy	\$ 20.75	Â	Â	Â	Â	Â	06/13/2002(1)	06/12/2011	common stock	1,667
Employee Stock Option Right to Buy	\$ 24.11	Â	Â	Â	Â	Â	06/13/2003(2)	06/12/2012	common stock	1,667
Employee Stock Option Right to Buy	\$ 25.2	Â	Â	Â	Â	Â	05/01/2005(3)	04/30/2014	common stock	1,667

Reporting Owners

Reporting Owner Name / Address	Relationships							
roporous o when I wante / I wante oo	Director	10% Owner	Officer	Other				
Adair J Aubrey P. O. BOX 1187 STARKVILLE, MS 39760	Â	Â	Vice President	Â				

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Signatures

J. Aubrey Adair 01/24/2005

**Signature of Date
Reporting Person

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) The Options vest in four equal annual installments beginning on June 13, 2002
- (2) The Options vest in four equal annual installments beginning on June 13, 2003.
- (3) The Options vest in four equal annual installments beginning on May 1, 2005.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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