## Edgar Filing: NORWOOD JONATHAN W - Form 4

| NORWOOD<br>Form 4<br>May 16, 200   | JONATHAN<br>5  | W                   |           |  |                                       |                 |                     |  |  |              |  |
|--|--|---------------------|-----------|--|---------------------------------------|-----------------|---------------------|--|--|--------------|--|
| FORM   | 1 4  |                     |           |  |                                       |                 |                     |  | -  | PROVAL       |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 |  |                     |           |  |                                       |                 | OMB<br>Number:      | 3235-0287  |  |              |  |
| if no long<br>subject to<br>Section 1  | Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or |                     |           |  |                                       |                 | NERSHIP OF          | Expires:January 31,<br>2005Estimated averageburden hours per<br>response0.5  |  |              |  |
| Form 5<br>obligation<br>may cont<br><i>See</i> Instru<br>1(b).                 | inue. Section 1  | 7(a) of the         | Public Ut |  | ling Con                              | ipany           | Act of              | e Act of 1934,<br>1935 or Section<br>0   | ·  |              |  |
| (Print or Type F   | Responses)   |                     |           |  |                                       |                 |                     |  |  |              |  |
| NORWOOD JONATHAN W Symbo   |  |                     |           | Name and   |                                       | Tradii          | ng                  | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)  |  |              |  |
| (Mon   |  |                     |           | . Date of Earliest Transaction<br>Month/Day/Year)<br>5/12/2005 |                                       |                 |                     | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>Controller  |  |              |  |
|  |  |                     |           | mendment, Date Original<br>Ionth/Day/Year)                     |                                       |                 |                     | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |  |              |  |
| GREENVIL   | LE, SC 29602   | 2-0502              |           |  |                                       |                 |                     | Form filed by N<br>Person  | Iore than One Re   | porting      |  |
| (City)   | (State)  | (Zip)               | Tabl      | e I - Non-D  | erivative                             | Secur           | ities Acq           | uired, Disposed of   | , or Beneficial  | ly Owned     |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction I<br>(Month/Day/Ye  | ar) Executio<br>any |           | 3.<br>Transactio<br>Code                                       | 4. Securi<br>n(A) or Di<br>(Instr. 3, | ties A<br>spose | cquired<br>d of (D) | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of |  |
| Common<br>Stock  | 05/12/2005   |                     |           | F  | 603                                   | D               | \$<br>36.74         | 10,731   | 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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transac<br>Code<br>(Instr. 8 | 5.<br>tionNumber<br>of<br>) Derivativ<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     |                    | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|------------------------------------|--|---------------------|--------------------|--|--|---|---|
|   |   |   | Code V                             |  | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |   |

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## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                          |           | Relationships |           |            |       |  |  |  |  |
|--|-----------|---------------|-----------|------------|-------|--|--|--|--|
|  |           | Director      | 10% Owner | Officer    | Other |  |  |  |  |
| NORWOOD JONA<br>THE LIBERTY CO<br>PO BOX 502<br>GREENVILLE, SC | RPORATION |               |           | Controller |       |  |  |  |  |
| Signatures   |           |               |           |            |       |  |  |  |  |
| Jonathan W.<br>Norwood   | 05/16/2   | 2005          |           |            |       |  |  |  |  |
| <u>**</u> 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).

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.