Edgar Filing: ROQUEMORE JAMES W - Form 4

ROQUEMO	RE JAMES W										
Form 4	.										
May 02, 201											
FORM	14 UNITED	статгс	SECUE	ITIES A	ND EV	CUA	NCEC	OMMISSION		PPROVAL	
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						/01v11v1155101v	OMB Number:	3235-0287		
Check this box				U .					Expires:	January 31 2005	
if no long subject to		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									
Section 1		SECURITIES						Estimated average burden hours per			
Form 4 o			~ • •		response 0.						
Form 5 obligation	*						•	e Act of 1934,			
may cont	inue. Section 17			•	•	· ·	•	1935 or Section	1		
See Instru	iction	50(II)	of the In	vestment	Compan	iy Ac	1 01 194	0			
1(b).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of						Reporting Person(s) to					
DOOLENODE LANEG W				i i vanie and	Tieker of	mau	ing	Issuer			
	Symbol SOUTH	I STATE	Corp [SS	SB]							
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)			
()	()	()		Month/Day/Year)				_X_ Director10% Owner			
C/O SCBT FINANCIAL			05/01/2018					Officer (give title Other (specify			
	TION, 520 GER	VAIS						below)	below)		
STREET											
			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mor	nth/Day/Year)			Applicable Line)			
						_X_Form filed by One Reporting Person Form filed by More than One Reporting					
COLUMBIA	A, SC 29201							Person		1 6	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da		ned	3.	4. Securi			5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year		n Date, if	Transaction(A) or Disposed of (D)					Ownership	Indirect	
(Instr. 3)		any (Month/I	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Beneficially Owned	Form: Direct (D) or	Ownership	
		((Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price ¢	``````````````````````````````````````			
Common Stock	05/01/2018			А	565 <u>(1)</u>	А	ф 87.25	36,504	D		
							01.23			CC'1' 1	
Common								9,426	Ι	affiliated	
Stock										company	

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.

Edgar Filing: ROQUEMORE JAMES W - Form 4

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. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
ROQUEMORE JAMES W C/O SCBT FINANCIAL CORPORATION 520 GERVAIS STREET COLUMBIA, SC 29201		Х					
Signatures							
James W Roquemore	05/02/2018						
**Signature of	Date						

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).

(1) These restricted shares vest quarterly over 1 year.

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.