Edgar Filing: BURNS JOE E - Form 4

| BURNS JOE I | E | | | | | | | | | | |
|---|--|------------------|--------------|--|----------------------------------|------------|---------------------------------------|--|--|----------------------------------|--|
| Form 4 June 06, 2018 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | | OMB APPROVAL | | |
| Washington, D.C. 20549 | | | | | | | | OMB Number: | 3235-0287 | | |
| Check this box if no longer | | | | | | | Expires: | January 31, 2005 | | | |
| subject to Section 16. Form 4 or | CHANGES IN BENEFICIAL OWNERS SECURITIES | | | | | NERSHIP OF | Estimated a burden hou response | average rs per | | | |
| Form 5 obligations may contin <i>See</i> Instruct 1(b). | ue. Section 17(a | ı) of the H | Public Uti | | ing Com | ipany | Act of | ge Act of 1934, f 1935 or Sectio 40 | | 0.0 | |
| (Print or Type Re | sponses) | | | | | | | | | | |
| BURNS JOE E Symbol | | | | Name and Ticker or Trading STATE Corp [SSB] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) (M | liddle) | 3. Date of | Earliest Tra | insaction | | | (Click | ek all applicable | <i>(</i>) | |
| C/O SCBT FINANCIAL 06/04/20 CORPORATION, 520 GERVAIS STREET | | | | 118 _X_Officer (g below) | | | | re title Other (specify below) ef Credit Officer | | | |
| | | | | ndment, Date Original th/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 | | | |
| (City) | | (Zip) | | | | | | Person | | | |
| | | | | e I - Non-Do | | | | quired, Disposed o | | - | |
| | 2. Transaction Date (Month/Day/Year) | Execution any | | 3. Transactio Code (Instr. 8) Code V | on(A) or Di (D) (Instr. 3, | spose | d of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 06/04/2018 | | | S | 506 | D | \$ 90.6 | 39,137 | D | | |
| Common Stock | | | | | | | | 2,169 | Ι | Affiliate & minor relative | |
| Reminder: Repor | t on a separate line | for each cla | ass of secur | ities benefi | Persor | ns wh | io resp | indirectly. ond to the collec ned in this form | | EC 1474 (9-02) | |

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 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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and unt of rlying ities . 3 and 4) | 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 | | | |
| BURNS JOE E C/O SCBT FINANCIAL CORPORATION 520 GERVAIS STREET COLUMBIA, SC 29201 | | | Chief Credit Officer | | | | |

Signatures

Joseph E. Burns 06/06/2018

**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.