Edgar Filing: SOUTH STATE Corp - Form 4

SOUTH STA	TE Corp											
January 26, 20)17											
FORM	4 UNITE	D STATE					IGE CO	OMMISSION	OMB AI OMB Number:	PPROVAL 3235-0287		
Check this if no longer subject to Section 16. Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	Filed p Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940										
(Print or Type Re	sponses)											
1. Name and Address of Reporting Person <u>*</u> POLLOK JOHN C			Symbol	2. Issuer Name and Ticker or Trading Symbol SOUTH STATE Corp [SSB]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O SOUTH STATE CORP, 520 GERVAIS STREET			(Month/Day	3. Date of Earliest Transaction (Month/Day/Year) 01/25/2017					Director 10% Owner X Officer (give title Other (specify below) below) CHIEF FINANCIAL OFFICER			
	(Street)		4. If Amend Filed(Month				Ĺ	6. Individual or Jo Applicable Line) _X_ Form filed by C	One Reporting Pe	erson		
COLUMBIA	, SC 29201						-	Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zip)	Table	I - Non-D	erivative S	ecurit	ies Acqu	ired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Execu any	eemed tion Date, if h/Day/Year)	Code (Instr. 8)		ispose 4 and (A) or	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
COMMON STOCK	01/25/2017			Code V F	7 Amount 3,161	(D) D	Price \$ 91.35	91,710	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 2. 3. Transaction Date 3A. Deemed 5. 6. Date Exercisable and 7. Title and 8. Price of 9. Nt 4. Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber **Expiration Date** Amount of Derivative Deriv (Month/Day/Year) Underlying Security or Exercise any Code of Security Secu (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Securities (Instr. 5) Derivative Bene Derivative (Instr. 3 and 4) Securities Own Security Acquired Follo (A) or Repo Disposed Trans of (D) (Insti (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares

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Reporting Owners

Reporting Owner Name / Addre	SS	Relationships							
I B B B B B B B B B B B B B B B B B B B	Director	10% Owner	Officer	Other					
POLLOK JOHN C C/O SOUTH STATE CORP 520 GERVAIS STREET COLUMBIA, SC 29201			CHIEF FINANCIAL OFFICER						
Signatures									
JOHN C.									
POLLOK	01/26/2017								
<u>**</u> Signature of Reporting Person	Date								
Explanation of E	2 e e n o n	606'							

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.