Edgar Filing: Addison Jimmy Evan - Form 5

Form 5	2019										
February 09									OMB AF	PROVAL	
FORM	RITIES AND EXCHANGE COMMISSION				OMMISSION	OMB	3235-0362				
Check this box if			Washington, D.C. 20549					Number:	January 31,		
no longer to Section Form 4 or 5 obligati may cont	n 16. r Form AN ons inue.	ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: Estimated a burden hour response	2005 verage		
See Instru 1(b). Form 3 H Reported Form 4 Transacti Reported	Filed pu foldings Section 17	(a) of the	Public U		ng Comp	any A	Act of		1		
1. Name and Address of Reporting Person <u>*</u> Addison Jimmy Evan			2. Issuer Name <b>and</b> Ticker or Trading Symbol SOUTH STATE Corp [SSB]					5. Relationship of Reporting Person(s) to Issuer			
(Month/I			tatement for Issuer's Fiscal Year Ended nth/Day/Year) 31/2017			(Check all applicable) <u>X</u> Director 10% Owner Officer (give title Other (specify below) below)					
GERVAIS		P,A 520							0010)		
			Amendment, Date Original 6. Indi Month/Day/Year)			6. Individual or Jo	ividual or Joint/Group Reporting				
Thedition				-				(check	eck applicable line)		
COLUMBI	A, SC 29201							_X_ Form Filed by 0 Form Filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-Der	ivative Se	curiti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	) Execution any (Month/I		3. Transaction Code (Instr. 8)	4. Securi (A) or Di (Instr. 3, Amount	spose 4 and (A) or	d of (D	) Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Beneficial Ownership (Instr. 4)	
Common Stock	12/29/2017	Â		L	132 <u>(1)</u>	А	\$ 87.1:	5 13,893	D	Â	
Reminder: Report on a separate line for each class of			Persons who respond to the collection of information						SEC 2270		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Addison Jimmy Evan

Persons who respond to the collection of information SE 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)

(9-02)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Addison Jimmy Evan C/O SOUTH STATE CORP 520 GERVAIS STREET COLUMBIA, SC 29201	ÂX	Â	Â	Â			
Signatures							
Jimmy E. 02/0 Addison	9/2018						

\*\*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).
- (1) 2017 Year End Update For Shares Held In DRIP Account.

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.