Edgar Filing: SOUTH STATE Corp - Form 5

SOUTH STA	TE Corp											
Form 5												
February 12,	2015											
FORM 5								OMB APPROVAL				
UNITED STATES SECURITIES AND EXCHANGE COMMISSION							IISSION	OMB Number:	3235-0362			
Check this box if Was no longer subject			shington, D.C. 20549					Expires:	January 31,			
to Section 16. Form 4 or Form 5 obligations may continue. ANNUAL STAT				ATEMENT OF CHANGES IN BENEFICIAL DWNERSHIP OF SECURITIES					Estimated av burden hours response	•		
See Instruc 1(b). Form 3 Ho Reported Form 4 Transaction Reported	Filed p Idings Section 1	7(a) of the	Public Ut	ility Holding	ecurities Ex g Company ompany Act	Act	of 1935					
WALKER KEVIN P Sy			Symbol	2. Issuer Name and Ticker or Trading Symbol SOUTH STATE Corp [SSB]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended			(Check all applicable)						
(Month/D				th/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify				
12/31/20 C/O SOUTH STATE CORP, 520 GERVAIS STREET)14			below)		below)	(speeny		
			ndment, Date Original 6. In th/Day/Year)			6. Indi	ndividual or Joint/Group Reporting					
								(check	applicable line)			
COLUMBIA, SC 29201								Form Filed by One Reporting Person Form Filed by More than One Reporting on				
(City)	(State)	(Zip)	Table	e I - Non-Deri	vative Securit	ies Ao	cquired, l	Disposed of,	or Beneficially	Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Executionary	emed		4. Securities or Disposed (Instr. 3, 4 ar	Acqui of (D) nd 5) (A) or	ired (A)		6. s Ownership / Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
COMMON STOCK	12/31/2014	Â		L	Amount 125.1533 (1)	(D) A	Price \$ 67.08	9,603	D	Â		
Reminder: Per	ort on a senarate l	ine for each o	lass of	Persone wh	o respond to	n the	collectiv	on of inform	ation	SEC 2270		

securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SI 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)		Number Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
WALKER KEVIN P C/O SOUTH STATE CORP 520 GERVAIS STREET COLUMBIA, SC 29201	ÂX	Â	Â	Â			
Signatures							
KEVIN P. 02/1 WALKER 02/1	2/2015						

<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).

(1) YEAR END UPDATE FOR DIVIDEND REINVESTMENT PLAN.

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.