# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Print or Ty	pe Response	S)																	
	d Address of		Person*			ssuer Nam LLINS II				Trading S	ymbol		5	. Relation  X_ Direct	(Che	orting Person(s) to I ck all applicable)  _X10% Own		)	
2170 PIE	DMONT	(First) RD.		(Middle)		ate of Earli 22/2018	est Trai	ısacti	ion (	(Month/D	ay/Yea	r)		X Office	r (give title belo		Other an and CE	(specify below EO	v)
		(Street)			4. If	Amendmen	nt, Date	Orig	gina	l Filed(Mor	th/Day/Y	ear)		X_Form file	ed by One Repo	rting Pers	on		Line)
ATLAN	ΓA, GA 30	)324																	
(City	)	(State)		(Zip)			Table 1	l - No	on-I	Derivative	Secur	ities Ac	equir	ed, Dispo	sed of, or E	Benefici	ally Own	ed	
1.Title of S (Instr. 3)	ecurity		2. Trans Date (Month	action (Day/Year)	any	emed on Date, if 'Day/Year)	Code		1	4. Securit (A) or Di (Instr. 3,	sposed 4 and 5	of (D)	Ben Rep	neficially ( orted Tra	Owned Follonsaction(s)	owing	6. Ownersh Form: Direct (D or Indirec	/	ial hip
							Cod	e	V	Amount	(A) or (D)	Price		6. Individual or Joint/Group  X_Form filed by One Reporting Pe Form filed by More than One Re  Juired, Disposed of, or Benefic  5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)  2,755,456 (1)  9,890  107,483,337 (2)  or the collection of information of the collection of information of the control not required to respondently valid OMB control not information of the collection of of the c			(I) (Instr. 4)		<i></i>
	nc. Comm Par Value		01/22/	2018			F			4,595	D	\$ 47.88	2,7	55,456	(1)		D		
	nc. Comm Par Value												9,8	90			I	Spous	e
Rollins, Inc. Common Stock \$1 Par Value												107	7,483,33	37 <sup>(2)</sup>		I	RFPS Manag Comp LP	gement any I,	
Reminder:	Report on a s	separate lin	e for each		I - Deriv	ative Secu	rities A	.cqui	Po co th	ersons wontained ne form d , Disposed	ho res in this isplay	form s a cu Benefi	are rrent	not requ tly valid	ired to res	pond	unless	SEC 14	74 (9-02)
1 77'-1 6	I.	1 m	.•	24 5		outs, calls,		ıts, o							0 D : 0	0.37	1 6		11 37 .
	2. Conversion		tion	3A. Deemo Execution		4. Transactio		ıber	a	. Date Exe nd Expirat	ion Da	te /		o the collection of informare not required to respondently valid OMB control not ally Owned (S)  Title and mount of derlying curities alstr. 3 and (Instr. 5)  Bene Follo Repo Trans		Deriva	tive	0. Ownership Form of	11. Nature of Indirect Beneficial
Derivative Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/D	ay/Year)	any (Month/Da	ny/Year)	Code (Instr. 8)	Secu Acq (A)	osed O) r. 3,	e	Monun Da	y/Year)	(	Secur	rities	•	Securit Benefi Owned Follow Report Transa (Instr.	cially I	Security: Direct (D) or Indirect	Ownershi (Instr. 4)

#### **Reporting Owners**

D 41 0 N 1			Relationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
ROLLINS GARY W 2170 PIEDMONT RD. ATLANTA, GA 30324	X	X	Vice Chairman and CEO	

## **Signatures**

Glenn P. Grove, Jr., as Attorney-in-Fact for Gary W. Rollins	01/24/2018
***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) This number includes 6,980 shares of 401(k) stock, 43,261 Purchase Plan shares, and 244,200 of restricted shares.
- (2) Gary W. Rollins disclaims for the purpose of Section 16 of the Securities and Exchange Act of 1934 the beneficial ownership of these shares, except to the extent of any pecuniary interest therein, and this report is not an admission of such beneficial ownership.

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.