## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

1 Nome on	pe Response	- /																	
	nd Address of	1 0	Person*			Issuer Nam LLINS I			or Trading	Symbo	l	5	5. Relation _X_ Direct		k all ap	erson(s) to oplicable) _X 10% O			
2170 PIE	DMONT	(First) RD.		(Middle)		ate of Earli 26/2018	est Tran	sactio	on (Month/	Day/Yea	ar)		X_Officer (give title below) Other (specify below) Vice Chairman and CEO						
ATLAN	ΓA, GA 30	(Street)			4. If	Amendme	nt, Date	Origi	nal Filed(M	onth/Day/	Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person						ine)	
(City		(State)		(Zip)			Table I	- No	1-Derivati	e Secu	rities A	cquir	equired, Disposed of, or Beneficially Owned						
1.Title of S (Instr. 3)	Security		2. Trans Date (Month/	action Day/Year)	any	emed on Date, if /Day/Year)	Code			oisposed , 4 and (A)	es Acquired posed of (D) and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect (I)	Indirect Benefic Owners	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	. 1	Amoun		Price					(Instr. 4)			
	Inc. Comm Par Value	ion	01/26/2	2018			F		3,824	D	\$ 50.61	2,8	805,080	(1)	]	D			
-	Inc. Comm Par Value											9,8	390 <sup>(2)</sup>		]	I	Spous	e	
	Inc. Comm Par Value	on										10′	7,483,33	37 (2)	]	I	RFPS Manag Comp LP	gement any I,	
Reminder:	Report on a s	anarata lin		alass af as															
		eparate mic	e for each	class of se	curities	peneficially	owned		Persons containe	who re	s form	are	not requ	tion of infor ired to resp OMB contro	ond u	ınless	SEC 147	74 (9-02)	
		eparate inic	e for each		- Deriv	ative Secu	rities A	equir	Persons containe the form ed, Dispos	who red in this	is form ys a cu r Benefi	are irren icially	not requ itly valid	ired to resp	ond u	ınless	SEC 147	74 (9-02)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transac	tion	Table II  3A. Deeme Execution	- <b>Deriv</b> (e.g., ) ed Date, if	ative Secu buts, calls, 4. Transaction	rities A warran 5. Num of	cquire ts, op ber vative rities ired r osed )	Persons containe the form ed, Dispos	who red in this displayed of, or ertible cercisal attion D	r Benefi securit	icially icially ies) 7. Tit Amou Under Secur	not required to the and count of erlying	8. Price of Derivative Security (Instr. 5)	. Num Derivat Securiti Benefic Dwned Collowi Reporte	ber of 10 ive O Sing D Detroins of the order	o). whership orm of erivative ecurity: irect (D) indirect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)	

#### **Reporting Owners**

D 11 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	01/30/2018
	Date
	1

#### **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 274,600 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.