COPELAND REX A

Form 4 May 23, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5 Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

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

30(h) of the Investment Company Act of 1940

2 Issuer Name and Tielzer or Trading

1(b).

(Print or Type Responses)

1 Name and Address of Reporting Person *

See Instruction

COPELAN	ID REX A	Symbol	T SOUTHERN BANCORP, GSBC]	Issuer (Check all applicable)			
	(First) (I GREAT SOUTHI 8 S. GLENSTON)	(Month/ ERN 05/22/2	of Earliest Transaction Day/Year) 2018	Director 10% Owner Officer (give title Other (specify below) Treasurer / Senior Vice Pres of Subsidiary			
SPRINGFI (City)	(Street) ELD, MO 65802 (State)	Filed(Mo	endment, Date Original onth/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	1 au	3. 4. Securities Acquired (Transactiom Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price	Securities Ownership Indirect Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4)			
stock	05/22/2018		S 330 D $\frac{\phi}{58.38}$	42 23,318 D			

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Deriva Securit (Instr. :
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to purchase	\$ 19.53					<u>(1)</u>	11/16/2021	Common stock	4,200	
Option to purchase	\$ 29.64					(2)	12/18/2023	Common stock	1,050	
Option to purchase	\$ 32.59					(3)	10/15/2024	Common Stock	4,200	
Option to purchase	\$ 50.71					<u>(4)</u>	11/18/2025	Common Stock	4,200	
Option to purchase	\$ 41.3					<u>(5)</u>	10/24/2026	Common Stock	4,200	
Option to purchase	\$ 52.2					<u>(6)</u>	11/15/2027	Common Stock	4,200	

Reporting Owners

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other

COPELAND REX A CARE OF GREAT SOUTHERN BANK 218 S. GLENSTONE AVE SPRINGFIELD, MO 65802

Treasurer Senior Vice Pres of Subsidiary

Signatures

Matt Snyder, Attorney-in-fact for Rex A. 05/23/2018 Copeland

> **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) 1,050 shares vest on 11/16/2013, 11/16/2014, 11/16/2015 and 11/16/2016

Reporting Owners 2

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- (2) 1,050 shares vest on 12/18/2018
- (3) 1,050 shares vest on 10/15/2016, 10/15/2017, 10/15/2018 and 10/15/2019
- (4) 1,050 shares vest on 11/18/2017, 11/18/2018, 11/18/2019 and 11/18/2020
- (5) 1,050 shares vest on 10/24/2018, 10/24/2019, 10/24/2020 and 10/24/2021
- (6) 1,050 shares vest on 11/15/2019, 11/15/2020, 11/15/2021 and 11/15/2022

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.