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

| (| pe Response | s) | | | | | | | | | | | | |
|---|---------------|---|---|---|---|--|--|---|---|--|------------------------|-------------------------------------|--|--|
| Name and Address of Reporting Person * Luczynski Thomas E | | | | | 2. Issuer Name and Ticker or Trading Symbol ROLLINS INC [ROL] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
| (Last) (First) (Middle) 2170 PIEDMONT RD. | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/30/2017 | | | | | X Officer (give title below) Other (specify below) Corporate Secretary | | | | | | |
| (Street) | | | 4. If Amendment, | 4. If Amendment, Date Original Filed(Month/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 | | | | | |
| ATLANTA, GA 30324 (City) (State) (Zip) | | | т | Tabla I - Non-Darivativa Sacuritias Accu | | | | | aired, Disposed of, or Beneficially Owned | | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year | 2A. Deemed Execution Date, if | 3. Transaction Code (Instr. 8) | | <u> </u> | | quired of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | es Following (s) | 6. Ownership Form: | Beneficial | |
| | | | | (Month/Day/Year | Code | V | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | | \ / | Ownership (Instr. 4) |
| Rollins, l \$1 Par V | Inc. Comm | on Stock | 01/30/2017 | | F | | 420 | D | \$ 35.18 | 156,722 | 2 (1) | | D | |
| Reminder: | Report on a s | separate line fo | or each class of sec | urities beneficially o | wned direc | Pers | ons wh | o respo | | | ction of inf | | | 1474 (9-02) |
| Reminder: | Report on a s | separate line fo | | - Derivative Securit | ies Acquir | Pers cont the f | ons who | o respo this fo plays a | rm are curre | not requesting ntly valid | ired to res | ormation spond unle rol numbe | ss | 1474 (9-02) |
| 1. Title of Derivative Security | | 3. Transaction Date (Month/Day/ | Table II n 3A. Deemee Execution E Year) any | - Derivative Securit (e.g., puts, calls, w l 4. Transaction Code /Year) (Instr. 8) | ies Acquir arrants, op 5. | Pers cont the f ed, Di tions, and More | sons who cained in form discovered to convert at Exerc Expiration this hold by the convert at the Exerc Expiration to the Exercise Exercis | o responding this for Bendible secutions ble | rm are curre reficial rities) 7. T Ame Und Sect (Ins 4) | not requesting ntly valid | OMB conf | spond unle | of 10. Ownersl Form of Derivati Security Direct (I or Indire | 11. Natu of Indire Benefici Ownersh (Instr. 4) |

Reporting Owners

| | D 11 0 V 1 | Relationships | | | | | |
|-----|--|---------------|--------------|---------------------|-------|--|--|
| | Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| 217 | czynski Thomas E 70 PIEDMONT RD. LANTA, GA 30324 | | | Corporate Secretary | | | |

Signatures

| /s/ Thomas E. Luczynski | 02/01/2017 |
|---------------------------------|------------|
| **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 22,908 shares of Rollins, Inc. Common Stock Under Rollins, Inc. 401(k) plan, 4,371 Purchase Plan shares and 21,620 of restricted shares

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.