### Edgar Filing: Dymski Michael S - Form 4

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Form 4											
January 03, 2									OMB AF	PROVAL	
FORM		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287			
Check this box if no longer subject to Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWN SECURITIES					NERSHIP OF	Expires: January 20 Estimated average burden hours per response		
Form 5 obligation may conti <i>See</i> Instru 1(b).	Section 17	(a) of the	Public U		ling Con	ipany	Act of	e Act of 1934, 1935 or Section 0	1		
(Print or Type R	lesponses)										
Dymski Michael S S			Symbol	Name <b>and</b> I Manage				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (	Middle)	Regional Management Corp. [RM] (0 3. Date of Earliest Transaction					(Chec	ck all applicable)		
(Mont				onth/Day/Year) /31/2017				Director      10% Owner        Officer (give title      Other (specify below)        Other (specify below)      Other (specify below)        OPP & Chief Accounting Officer			
(Street) 4. If A			4. If Ame	Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mo GREER, SC 29651				onth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State)	(Zip)			• •	a	••	Person			
		-					-	uired, Disposed of		-	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executio any	n Date, if	3. Transactio Code (Instr. 8)	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)			
Common Stock	12/31/2017			F	1,022	D		5,885	D		

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

Persons who respond to the collection of information 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)

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Dymski Michael S C/O REGIONAL MANAGEMENT CORP. 979 BATESVILLE ROAD, SUITE B GREER, SC 29651			VP & Chief Accounting Officer				
Signatures							
// Duing L Fisher							

# /s/ Brian J. Fisher,

attorney-in-fact

01/03/2018

Date

\*\*Signature of Reporting Person

### **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) Reflects shares withheld in satisfaction of tax withholding obligations upon vesting of restricted stock. This is a non-market transaction.

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.