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HORNBECK OFFSHORE SERVICES INC /LA

Form 4

December 09, 2014

FORM 4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION
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Check this box

if no longer

Section 16.

subject to

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

0.5

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Washington, D.C. 20549

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * HORNBECK LARRY D

5. Relationship of Reporting Person(s) to Issuer

HORNBECK OFFSHORE

2. Issuer Name and Ticker or Trading

(Check all applicable)

SERVICES INC /LA [HOS] (Last) (First) (Middle) 3. Date of Earliest Transaction

> (Month/Day/Year) 12/05/2014

Symbol

X_ Director 10% Owner Other (specify Officer (give title below)

COUNTY ROAD 3195, PO BOX 590

(Street)

(State)

(Zip)

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

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

LOVELADY, TX 75851

(City)

STOCK

						-		*	•
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if		4. Securiton(A) or Di		•	5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr. 3)		any	Code	(D)			Beneficially	Form: Direct	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned	(D) or	Ownership
							Following	Indirect (I)	(Instr. 4)
					(4)		Reported	(Instr. 4)	
					(A)		Transaction(s)		
			Codo V	Amount	or (D)	Price	(Instr. 3 and 4)		
COLUMN			Code V	Amount	(D)				
COMMON STOCK	12/05/2014		M	4,000 ₍₁₎	A	\$ 23.1	205,969	D	
brock				<u> </u>		23.1			
COMMON							85,000	I	By Family

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.

Trusts (2)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transactic Code (Instr. 8)	5. Number on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day)	ate	7. Title and An Underlying Sec (Instr. 3 and 4)	curities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
STOCK OPTION (right to buy)	\$ 23.1	12/05/2014		M	4,000 (1)	(3)	02/22/2015	COMMON STOCK	4,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HORNBECK LARRY D COUNTY ROAD 3195, PO BOX 590 LOVELADY, TX 75851	X					

Signatures

/s/ Beth A. LaBrosse as POA for Larry D.

Hornbeck 12/09/2014

**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) Represents a broker-assisted exercise and hold of an employee stock option award granted to the reporting person for service as a non-employee director of the company on February 22, 2005 that would expire on February 22, 2015.
- (2) Represents shares beneficially owned by reporting person through various family trusts.
- (3) The option provides for vesting in three equal annual installments on the 1st, 2nd and 3rd anniversaries of the February 22, 2005 Grant Date.

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.

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