## Edgar Filing: STONE ENERGY CORP - Form 4

STONE ENE	ERGY CORP										
Form 4											
February 21,	2017										
<b>FORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION								т	PPROVAL		
Washington, D.C. 20549							OMB Number:	3235-0287			
Check thi	s box		vv as	inington,	D.C. 20.					January 31,	
if no long		ENT OF	CHAN	GES IN F	GES IN BENEFICIAL OWNERSHIP (				Expires:	2005	
subject to Section 10					SECURITIES				Estimated average burden hours per		
Form 4 or							response				
Form 5	Filed purs	uant to Se	ction 16	(a) of the	e Securiti	es Ez	kchang	ge Act of 1934,	•		
obligation may conti				•	•	- ·		f 1935 or Sectio	n		
See Instru		30(h) of	f the Inv	vestment (	Compan	y Act	of 19	40			
1(b).											
(Print or Type R	(esponses)										
(I IIII of Type I											
1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name and Ticker or Trading 5. Relationship of 1							f Reporting Per	Reporting Person(s) to			
TAYLOR PHYLLIS M. Symbol				_				Issuer			
		S	STONE	ENERGY	Y CORP	[SG]	Y]	(Che	ck all applicabl	e)	
(Last)	(First) (M	iddle) 3	3. Date of Earliest Transaction				ck all applicabl	un uppricubic)			
(Month/I			Month/Da	th/Day/Year)				XDirector10% Owner			
			02/17/20	$\frac{117/2017}{\text{below}}$				Officer (give below)	(give title Other (specify below)		
CHARLES A	AVENUE							· · · · · ,	,		
(Street) 4.			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
		F	Filed(Mont	h/Day/Year)				Applicable Line)	One Deporting D	arcon	
NEW ODI E	EANS, LA 70130							_X_ Form filed by Form filed by 1	More than One R		
NEW ORLE	ANS, LA 70150							Person			
(City)	(State) (	Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	2A. Deemo	ed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution							Form: Direct	Indirect	
(Instr. 3) any (Month/Da			CodeDisposed of (D)Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(infoliatily De	<i>ay</i> , 10 <i>a</i> )	(msu: o)	(111501-5),	i una	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price	(			
Common stock, \$0.01											
par value	02/17/2017			А	459 <u>(1)</u>	А	\$0	7,700	D		
per share											

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)

1. Title o Derivati Security (Instr. 3)	ve Conversion or Exercise	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)		ate	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## Edgar Filing: STONE ENERGY CORP - Form 4

## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
TAYLOR PHYLLIS M. ONE LEE CIRCLE 944 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	X							
Signatures								
Phyllis M. Taylor	2/21/2017							
<u>**Signature of</u>	Date							

<u>\*\*</u>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) Shares acquired are common shares granted under the company's Stock Incentive Plan.

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.