#### STIFEL FINANCIAL CORP

Form 4 March 09, 2015

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287 January 31,

Expires: 2005

**OMB APPROVAL** 

burden hours per 0.5

Estimated average response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address MULROY THO		g Person *	2. Issuer Name <b>and</b> Ticker or Trading Symbol STIFEL FINANCIAL CORP [SF]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check an applicable)		
200 GARRISON FOREST ROAD		ROAD	(Month/Day/Year) 03/06/2015	_X_ Director10% Owner _X_ Officer (give title Other (specify below) Director		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
OWINGS MILI	LS, MD 211	17-4110	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	(Zip) <b>Tabl</b>	e I - Non-D	Derivative S	Securi	ties Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed 3. 4. Securities Acquire Execution Date, if any Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8)				of (D)	5. Amount of Securities Beneficially Owned Following	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	03/06/2015		S	10,000	D	\$ 55.6	193,155	D	
Common Stock	03/06/2015		S	5,000	D	\$ 55.45	188,155	D	
Common Stock	03/06/2015		S	5,000	D	\$ 54.8	183,155	D	
Common Stock	03/06/2015		S	5,000	D	\$ 54.55	178,155	D	

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

#### Edgar Filing: STIFEL FINANCIAL CORP - Form 4

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title and A	Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Underlying S	Securities	Derivativ
Security	or Exercise		any	Code	of	(Month/Day/	/Year)	(Instr. 3 and	4)	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	ve				(Instr. 5)
	Derivative				Securitie	S				
	Security				Acquired	l				
					(A) or					
					Disposed	l				
					of (D)					
					(Instr. 3,					
					4, and 5)					
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom								Common		
Stock	\$ 0					(1)	(2)	Common	156,831	
Units								Stock		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
MULROY THOMAS P 200 GARRISON FOREST ROAD OWINGS MILLS, MD 21117-4110	X		Director				

### **Signatures**

**THOMAS** 03/09/2015 **MULROY** \*\*Signature of Date 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) Units vest 100% three years from the grant date.
- (2) No expiration date for these Units.

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.

Reporting Owners 2