CATES ANDREW F.

Form 4 May 21, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

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

obligations

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

2. Issuer Name and Ticker or Trading

may continue.

See Instruction

30(h) of the Investment Company Act of 1940

Symbol

1(b).

(Print or Type Responses)

CATES ANDREW F.

1. Name and Address of Reporting Person *

| | | | PIONEER NATURAL RESOURCES CO [PXD] | | | | | (Check all applicable) | | | | |
|--------------------------------------|---|----------------------|--|---|---|--|---|---|--|---|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | Director 10% Owner Officer (give title Other (specify | | | | |
| 5205 N. O'CONNOR BLVD., SUITE 200 | | | 05/17/2018 | | | | | below) | below) | | | |
| | (Street) | | 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 | | | | |
| IRVING, T | | | | | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction (Month/Day/Y | Year) Executi any | emed on Date, if /Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securi onAcquirec Disposec (Instr. 3, | (A) or (A) or (A) |) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | | | | | | | | 382 | I | by daughter | | |
| Common Stock | | | | | | | | 382 | I | by son | | |
| Common Stock | | | | | | | | 190 | I | by children's trusts | | |
| Common Stock | | | | | | | | 882 | I | 401(k) | | |
| | | | | | | | | 400 | I | | | |

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Common by spouse's Stock IRA

Common Stock 05/17/2018 A 1,164 A \$ 0 12,970 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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transa Code (Instr. | | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Under Secur | rlying | 8. Price of Derivative Security (Instr. 5) |
|---|---|--------------------------------------|---|---------------------------------|---|---|---------------------|--------------------|------------------------|--|---|
| | | | | 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

CATES ANDREW F. 5205 N. O'CONNOR BLVD., SUITE 200 IRVING, TX 75039

Signatures

Thomas J. Murphy, Attorney-in-Fact For Andrew F. Cates

05/21/2018

**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).

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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