Edgar Filing: CRAGG CHRISTOPHER E - Form 4

| CRAGG CHRISTPHER E Form 4 January 07, 2019 FORM4 Image: Comparing the problem of the problem o | | | | | | | | | | | | |
|---|--|-----------------|-----|---|--|--------|-------------|--|--|---|--|--|
| (Print or Type Responses) | | | | | | | | | | | | |
| CRAGG CHRISTOPHER E Symbol | | | | STATES INTERNATIONAL, | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| | | | | e of Earliest Transaction n/Day/Year) /2019 | | | | Director 10% Owner X Officer (give title Other (specify below) below) Executive VP, Operations | | | | |
| | | | | | nendment, Date Original Ionth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person | | | |
| HOUSTON, TX 77002 — Form filed by More than One Reporting Person | | | | | | | | | | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-I | Derivative S | Securi | ties Acqu | uired, Disposed of, | , or Beneficiall | y Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | Executio any | | 3. Transactio Code (Instr. 8) Code V | | sposed | of (D) | 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 | 01/04/2019 | | | А | 14,957 (1) | А | \$0 | 167,544 | D | | | |
| Common Stock | 01/04/2019 | | | F | 6,276 (2) | D | \$ 16.49 | 161,268 | D | | | |

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

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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) | 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 unt of rlying tities (. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne 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 | | | | |
| CRAGG CHRISTOPHER E THREE ALLEN CENTER 333 CLAY STREET, SUITE 4620 HOUSTON, TX 77002 | | | Executive VP, Operations | | | | | |
| Signatures | | | | | | | | |
| Lloyd A. Hajdik, pursuant to power of attorney | | 01/07/2019 | | | | | | |
| **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).

Reflects the number of shares earned in respect of total shareholder return ("TSR") performance-based restricted stock units originally granted on February 17, 2016. On January 4, 2019, the Compensation Committee certified the achievement of the applicable performance metric, which measured TSR of the Company over the three year period from January 1, 2016 to December 31, 2018 relative to the TSR

of each of a peer group of companies.

(2) Shares surrendered for payment of tax liability incident to vesting of performance-based restricted stock 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.