## Edgar Filing: GULFMARK OFFSHORE INC - Form 4

GULFMA Form 4 October 19	RK OFFSHORE I	NC										
									OMB A	PPROVAL		
FOR	VI 4 UNITED	STATES		RITIES				E COMMISSIO	N OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or									Expires:	January 31,		
						WNERSHIP OF	Estimated burden ho response	ours per				
Form 5 obligati may co <i>See</i> Inst 1(b).	ntinue. Section 17	(a) of the l	Public I		olding C	ompa	ny Act	nge Act of 1934, c of 1935 or Secti 1940				
(Print or Type	e Responses)											
1. Name and Address of Reporting Person <u>*</u> Ross Rex			2. Issuer Name <b>and</b> Ticker or Trading Symbol				ding	5. Relationship of Reporting Person(s) to Issuer				
			GULFMARK OFFSHORE INC [GLF]				NC	(Check all applicable)				
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					X_ Director 10% Owner Officer (give title Other (specify				
	M HOUSTON Y N., STE 400		10/15/2015					below) below)				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>						
HOUSTO	N, TX 77024							Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tal	ble I - Non	-Derivati	ve Sec	urities A	Acquired, Disposed	of, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)		any Code		Transacti	onAcquir Dispos	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		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)		
				Code V	Amoui	nt (D)	Price	(Instr. 5 and 4)				
Reminder: Re	eport on a separate lin	e for each cl	ass of sec	curities ben	Per info req dis	sons ormati uired	who res on con to resp	or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tal							Beneficially Owner securities)	d			
1 Title of	<b>) ) T</b>	agastian D-4	24 D		4	-	Number	n of 6 Data From	ischlaund 7	Title and America		

1. Title of<br/>Derivative2.3. Transaction Date<br/>(Month/Day/Year)3A. Deemed4.5. Number of<br/>TransactionDerivative6. Date Exercisable and<br/>Expiration Date7. Title and Amount of<br/>8. Pr<br/>Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		/Year)	(Instr. 3 and	4)	Secu (Inst
				Code V	(A) (E	) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	10/15/2015		А	199.42	<u>(1)</u>	(1)	Common Stock	199.42	\$ :

## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
1	Director	10% Owner	Officer	Other			
Ross Rex 842 W. SAM HOUSTON P STE 400 HOUSTON, TX 77024	ARKWAY N.	Х					
Signatures							
lel Day Doss	10/10/2015						

/s/ Rex Ross	10/19/2015			
<u>**</u> 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).

Phantom Stock units credited under the Company's Deferred Compensation Plan (the "Plan"). Participants are always 100% vested in
(1) their contributions to the Plan. Employer contributions vest according to the provision of the Plan, which is generally based on years of service (20% per year of credited service). A participant is 100% vested after 5 years of credited service.

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.