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Carr Terrell I												
Form 4												
February 16,	2011											
FORM 4 LINITED STATES SECURITIE										PPROVAL		
UNITED STATES SECURITI					TES AND EXCHANGE COMMISSION ngton, D.C. 20549				OMB Number:	3235-0287		
Check this				shington, D.C. 2034)					Expires:	January 31		
if no long	er STAT	EMENT O	F CHAN	CHANGES IN BENEFICIAL OWNERSHIP OF						200;		
subject to STATEMENT OF CHAN Section 16.				SECURITIES					Estimated average burden hours per			
Form 4 or									response			
Form 5	They pursually to Section 10(a) of the Securities Exchange Act of 1934.											
obligation may conti				•	•	· ·		f 1935 or Sectio	n			
See Instru		30(h)	of the In	vestment	Compan	y Act	t of 194	40				
1(b).												
(Print or Type R	esponses)											
(Thit of Type R	esponses											
1. Name and Address of Reporting Person _ 2. Issue:			2. Issuer	Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
Carr Terrell L Sym							-0	Issuer				
				HERCULES OFFSHORE, INC.				(Charle all applicable)				
	[HERO]	[HERO]				(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			Director		Owner		
			(Month/D					XOfficer (give titleOther (specify below)				
9 GREENWAY PLAZA, SUITE 02/14/2				011				Vice President-Worldwide Ops				
2200										•		
(Street) 4. If a			4. If Amer	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mor				Ionth/Day/Year)				Applicable Line)				
								X Form filed by One Reporting Person Form filed by More than One Reporting				
HOUSTON,	IX //046							Person		1 0		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Acc	uired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction	Date 2A. Dee	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Y		on Date, if Transaction(A) or Disposed of				d of	Securities	Form: Direct (D) or			
(Instr. 3) any (Month/Day)			Dav/Year)	Code (D) ay/Year) (Instr. 8) (Instr. 3, 4 and 5)				Beneficially Owned	Beneficial Ownership			
		(infoliaity	Duj/ I cui)	(1) (1)				Following	(Instr. 4)			
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	(Instr. 5 and 1)				
Common Stock Der					4 201		¢					
Stock, Par Value \$0.01	02/14/2011			F	4,291 (1)	D	ъ 4.27	47,131	D			
Per Share					<u> </u>		4.27					
i or silure												

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)	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	7. Tit Amou Under Secur (Instr	int of rlying	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			
Carr Terrell L 9 GREENWAY PLAZA, SUITE 2200 HOUSTON, TX 77046			Vice President-Worldwide Ops				
Signatures			Ops				

/s/ James W. Noe, attorney-in-fact

02/16/2011

Date

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).

The reporting person disposed of these shares directly to the issuer upon the vesting of previously awarded restricted stock. The purpose of the disposition was to enable the reporting person to satisfy tax withholding obligations that arose upon such vesting, which will be (1) paid by the issuer to the Internal Revenue Service in cash.

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.