

OMB APPROVAL	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>HARP JAMES O JR</u> _____ (Last) (First) (Middle) 103 NORTH PARK BOULEVARD, SUITE 300 _____ (Street) COVINGTON LA 70433 _____ (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>HORNBECK OFFSHORE SERVICES INC /LA [HOS]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Executive Vice President & CFO</u>
	3. Date of Earliest Transaction (Month/Day/Year) 03/08/2019	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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	Amount	(A) or (D)	Price			

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
PHANTOM STOCK ⁽¹⁾	(1)	03/08/2019		A		339,860		(1)	03/08/2022	COMMON STOCK	339,860	\$0.00	339,860	D	
STOCK APPRECIATION RIGHTS ⁽²⁾	\$1.38	03/08/2019		A		226,573		(2)	03/08/2029	COMMON STOCK	226,573	\$0.00	226,573	D	

Explanation of Responses:

- The phantom stock units vest in three equal annual installments on each of the 1st, 2nd and 3rd anniversaries of the grant date. Each phantom stock unit represents the right to receive, upon settlement, the economic equivalent of one share of the Company's common stock. Phantom stock units may be settled in shares of Company common stock, cash, or a combination thereof (at the election of the issuer).
- The stock appreciation rights vest and become exercisable in three equal annual installments on each of the 1st, 2nd and 3rd anniversaries of the grant date. The stock appreciation rights represent the right to receive, upon exercise, a number of shares of Company common stock, cash, or a combination thereof (at the election of the issuer) equal to the product of the aggregate number of shares of Company common stock with respect to which the stock appreciation right award is exercised and the excess of the fair market value of a share of Company common stock as of the date of exercise over the base price specified above.

Remarks:

/s/ Beth A. LaBrosse, as POA 03/12/2019
for James O. Harp

** Signature of Reporting Person Date

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

* 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.

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 Number.