FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------|-------------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |
| | la constant | | | | | | | | |

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

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

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|--------------------------|--------|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | |
| Estimated average burden | | | | | | |
| hours per response: | 0.5 | | | | | |

| Name and Address of Reporting Person* Rynd John T | | | | | HC | 2. Issuer Name and Ticker or Trading Symbol HORNBECK OFFSHORE SERVICES INC /LA [HOS] | | | | | | | | | | all app | blicable) ctor | Person(s) to Issuer 10% Owner | | wner |
|--|--|--|------------------------------|---|-------|--|--|--------|--------------------------------------|--|--|------|---------------|----------------------------|--|---|---|--|---|----------|
| (Last) (First) (Middle) 103 NORTHPARK BLVD, SUITE 300 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/29/2017 | | | | | | | | | | Officer (give title below) | | | Other (specify below) | | | |
| (Street) COVINC | | | 70433 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | eay/Year) Ex | | 2A. Deemed Execution Date, f any Month/Day/Year) | | Code (| Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | and Sec Ber Ow | | ount of ities icially d Following | 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 | | Reported Transaction(s) (Instr. 3 and 4) | | | | (1130.4) |
| COMMON STOCK | | | | 09/29/2017 | | | | | P | | 4,036(1) | | A \$3.96 | | 63,980 | | D | | | |
| | 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) | vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any | | 4. Transa Code (8) | | | ative rities ired osed | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Title Shares | | ount | t | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner Form: Direct or Indi (I) (Ins | (D) rect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

- 1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on September 8, 2017.
- 2. The price represents the weighted average purchase price for multiple transactions reported on this line. Purchase prices ranged from \$3.87-\$4.02. Reporting Person will provide, upon request by the Commission staff, the Issuer, or a security holder of the Issuer, full information regarding the number of shares purchased at each separate purchase price.

Remarks:

/s/ Beth A. LaBrosse as POA 10/03/2017 for John T. Rynd

** 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.