FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

Washington, D.C. 20549	

OMB APPROVAL

OMB Number: 3235-0287

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٦	Section 16. Form 4 or Form 5 obligations may continue. See
J	obligations may continue. See
	Instruction 1(h)

## 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*  HORNBECK TODD M					<u>H</u>	2. Issuer Name and Ticker or Trading Symbol HORNBECK OFFSHORE SERVICES INC /LA [ HOS ]									ck all applica Director	10% Owner		ner	
(Last) (First) (Middle) 103 NORTHPARK BOULEVARD, SUITE 300					Date o	of Earliest T	ransa	ction (Mo	nth/D	ay/Year)	X	Officer (give title below)  President & CEO				sceny			
(Street)	ΓON L	A	70433		4. 1	I. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	•				
(City)	(S	tate)	(Zip)												Person				
			ble I - No	1					<u> </u>	Disp									
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		- 1	Execution Date,		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				5. Amount of Securities Beneficially Owner following	ly		Direct Indirect Itr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount (A) or (D)		A) or D)	Price	Reported Transaction(s) (Instr. 3 and 4)						
COMMON	STOCK			02/1	18/201	14			A		47,247	7(1)	Α	\$ <mark>0</mark>	763,	057		D	
COMMON	N STOCK			02/1	L <mark>8/20</mark> 1	14			A		47,247	7(2)	A	\$0	810,	304		D	
COMMON	N STOCK														1,6	50		I E	By Wife
COMMON STOCK												20,000			I F	By Family Frusts <sup>(3)</sup>			
COMMON STOCK													70			I C	By JTMA custodian for child		
COMMON STOCK													220			I F	By IRA		
			Table II -				urities A								wned				
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		d Date,	4. Transaction Code (Instr.		5. Number of 6 Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		mount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficial Owned Following Reported Transact	e sally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisal		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	.5.1(3)		
PHANTOM RSU, CASH- ONLY	(4)	02/18/2014			A		5,833 <sup>(4)</sup>		02/17/20:	17 (	02/17/2017	COM		5,833	\$0	5,83	3	D	

## Explanation of Responses:

- 1. These time-vest restricted stock awards will vest in three equal annual installments on the 1st, 2nd and 3rd anniversaries of the Grant Date.
- 2. These performance-vest restricted stock awards can vest in whole or in part on the 3rd anniversary of the Grant Date based upon the Company achieving certain levels of specified performance objectives.
- 3. Represents shares beneficially owned by Reporting Person through various family trusts.
- 4. These time-vest phantom restricted stock unit awards will vest in whole on the third anniversary of the Grant Date, each is the economic equivalent of one share of Common Stock, and the phantom shares are payable only in cash based on the market price of the Company's stock on that date.

/s/ Paul M. Ordogne, as poa for Todd M. Hornbeck

02/20/2014

\*\* 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.