## Edgar Filing: TIDEWATER INC - Form 4

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Form 4	K INC										
March 13, 20	15										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	hington,			NGE C		OMB Number:	3235-0287				
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation: may contin <i>See</i> Instruct 1(b).	suant to Solution (Solution of the P	F CHANGES IN BENEFICIAL OWNER SECURITIES Section 16(a) of the Securities Exchange Ac Public Utility Holding Company Act of 193 of the Investment Company Act of 1940					e Act of 1934, 1935 or Section	burden hour response	stimated average Irden hours per		
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person <u>*</u> Fanning Quinn P			2. Issuer Name <b>and</b> Ticker or Trading Symbol TIDEWATER INC [TDW]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O TIDEWATER INC., 601 POYDRAS ST., SUITE 1500			3. Date of Earliest Transaction (Month/Day/Year) 03/06/2015					Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President & CFO			
(Street) NEW ORLEANS, LA 70130			4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting Person</li> </ul>			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Aca	uired, Disposed of	or Beneficial	v Owned	
	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D.	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit n(A) or Di (Instr. 3,	ties A spose	cquired d of (D) 5) Price	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	
Common Stock	03/06/2015			Р	3,500	А	\$ 25.78 (1)	74,260	D		
Common Stock								1,221	I	by 401(k) Plan <u>(2)</u>	

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

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 control number.

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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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	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**

<b>Reporting Owner Name / Address</b>	Relationships						
r g -	Director	10% Owner	Officer	Other			
Fanning Quinn P C/O TIDEWATER INC. 601 POYDRAS ST., SUITE 1500 NEW ORLEANS, LA 70130			Executive Vice President & CFO				
Signatures							
Bruce D. Lundstrom as Agent and Attor Fanning	mey-in-Fact	for Quinn P.	03/13/201	5			

\*\*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).

This transaction was executed in multiple trades at prices ranging from \$25.78 to \$25.79. The price reported above reflects the weighted
 average sale price. Upon request from the SEC staff, the issuer, or a security holder of the issuer, the Reporting Person hereby undertakes to provide the requesting party with full information regarding the number of shares and prices at which the transaction was effected.

Date

(2) Represents shares acquired on a periodic basis and held for the benefit of the Reporting Person by the Trustee of the Tidewater Inc. 401(k) Savings Plan as of February 28, 2015.

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.