Edgar Filing: DXP ENTERPRISES INC - Form 4/A

| DXP ENTER | PRISES INC | | | | | | | | | | |
|---|--------------------------------------|--------------------------------------|--|--|---|----------|---|--|--|--|--|
| Form 4/A | | | | | | | | | | | |
| July 12, 2017 | | | | | | | | | OMB AI | PPROVAL | |
| FORM | UNITED | STATES | | ITIES Al hington, 1 | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check this box if no longer | | | | GES IN BENEFICIAL OWNE SECURITIES | | | | NERSHIP OF | burden hou | Expires: January 31 2009 Estimated average burden hours per response 0.4 | |
| Form 5 obligation may conti <i>See</i> Instru 1(b). | s Section 17 | (a) of the l | Public Ut | • • | ing Com | ipany | Act of | e Act of 1934, f 1935 or Sectio 40 | | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| DAVIS CLETUS Symbol | | | Symbol | r Name and Ticker or Trading NTERPRISES INC [DXPE] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) | (Middle) | | Earliest Tra | | .[21 | | (Chec | k all applicable | ;) | |
| 7272 PINEM | IONT DRIVE | | (Month/Da | ay/Year) | | | | _X_ Director Officer (give below) | | Owner er (specify | |
| | | | ndment, Date Original th/Day/Year) 017 | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| HOUSTON, | TX 77040 | | | | | | | Form filed by M Person | Iore than One Re | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-Do | erivative S | Securi | ties Acc | quired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year | Executio any | med n Date, if Day/Year) | 3. Transactio Code (Instr. 8) | 4. Securi on(A) or Di (D) (Instr. 3, | spose | d of | Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| DXP Common Stock | 07/01/2017 | | | Code V M | Amount 4,851 | (D) A | Price \$ 34.5 | (Instr. 3 and 4) 17,546 | D | | |

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.

 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. Transactic Code (Instr. 8) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | (Month/Day/Year) ative ties red sed 3, | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price o Derivativ Security (Instr. 5) |
|---|---|---|---|--|---|---|--------------------|---|--|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| DXP Restricted Stock Units | \$ 0 | | | | | <u>(1)</u> | <u>(1)</u> | DXP Common Stock | 2,174 | |

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Reporting Owners

| Reporting Owner Name / Addr | ·ess | Relationships | | | | | | | |
|--|------------|---------------|---------|-------|--|--|--|--|--|
| Treforming Contract (anter France | Director | 10% Owner | Officer | Other | | | | | |
| DAVIS CLETUS 7272 PINEMONT DRIVE HOUSTON, TX 77040 | Х | | | | | | | | |
| Signatures | | | | | | | | | |
| Cletus Davis | 07/12/2017 | | | | | | | | |
| **Signature of Reporting Person | Date | | | | | | | | |

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).

(1) Grant Date July 1, 2017. The terms of the grant provide for vesting in one installment on the one year anniversary of the grant date.

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.