FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| hours per response: | 0.5 |
|--------------------------|-----|
| Estimated average burden | |

| 1. Name and Address of Reporting Person* HOLCOMB G STEPHEN | | | 2. Issuer Name and Ticker or Trading Symbol <u>KIRBY CORP</u> [KEX] | (Check all applicable) Director | 10% Owner |
|---|---------|----------|--|------------------------------------|--------------------------------|
| (Last) (First) (Middle) | | | — [| X Officer (give below) | title Other (specify below) |
| | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | , | , |
| | | | 08/08/2007 | Vice Pre | s-Investor Relations |
| | | | | | |
| SUITE 1000 | | | | | |
| | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/ Line) | Group Filing (Check Applicable |
| (Street) | | | | · · · | |
| HOUSTON | TX | 77007 | | X Form filed b | y One Reporting Person |
| | | | | Form filed b Person | y More than One Reporting |
| (City) | (State) | (Zip) | | | |

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. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | | (1150.4) | |
| Common Stock, par value \$.10 per share | 08/08/2007 | | М | | 10,000 | A | \$12.775 | 22,713 | D | | |
| Common Stock, par value \$.10 per share | 08/08/2007 | | S | | 10,000 | D | \$42 | 12,713 | D | | |
| Common Stock, par value \$.10 per share | | | | | | | | 5,646 | Ι | 401K Plan | |

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. Transa Code (8) | | of | | 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 | Amount or Number of Shares | | | | |
| Employee Stock Option (Right to Buy) | \$12.775 | 08/08/2007 | | М | | | 10,000 | 01/27/2006 ⁽¹⁾ | 01/27/2008 | Common Stock | 10,000 | \$12.775 | 36,600 | D | |

Explanation of Responses:

 $1. \ Original \ option \ exercisable \ 33\% \ after \ one \ year, \ 67\% \ after \ two \ years \ and \ 100\% \ after \ three \ years \ from \ date \ of \ grant.$

Remarks:

<u>G. Stephen Holcomb</u>

** Signature of Reporting Person

08/10/2007

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.