FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average t	ourden								

0.5

hours per response:

	Check this box if no longer subject to
١	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

						Jecui	011 30(11)	OI LITE I	IIVESUIICI	it Con	прапу Аст	01 13	40									
1. Name and Address of Reporting Person* HMH TRUST OF 1992					2. Issuer Name and Ticker or Trading Symbol KIRBY CORP [KEX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
															Direc			10% C				
,					-									\dashv		Office	er (give title	2	X Other below)	(specify		
(Last)	(Fi	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)									Trust with Insider Trustee							
5005 WOODWAY					10/	10/06/2005									Trust with insider trustee							
SUITE 200																						
00112					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Street)						4. II Amendment, Date of Original Filed (World // Day/ Teal)										Line)						
HOUSTO	ON TX	z 5	77056												X	Form	n filed by One	e Rep	porting Pers	on		
1100310)IN 17	\	7030														n filed by Mo	re tha	an One Rep	orting		
					1											Pers	on					
(City)	(St	ate) (Zip)																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of S	Security (Inst	r. 3)		2. Trans	action					3. 4. Securities Acquired (A)									6. Ownership	7. Nature		
				Date (Month/	Day/Ye		if any	recution Date, any		Transaction Dispose Code (Instr. 5)		d Of (D) (Instr. 3,			Benefi Owned				Form: Direct (D) or Indirect	of Indirect Beneficial		
				ļ ·		(Month/Day/Ye		Day/Year									wned Following (i eported ansaction(s)		(I) (Instr. 4)	Ownership (Instr. 4)		
									Code	v	Amount		(A) or	Price	. 1	Transa				(111501. 4)		
										ļ.	7	(D) P			(Instr		r. 3 and 4)					
Common Stock, par value \$.10 per share 10/06/					6/2005	5			G	V	450 A		A	\$	0	4,495			D ⁽¹⁾			
		Ta	ble II - E	Derivat	ive S	ecu	ırities	Acau	ired. Di	isno	sed of.	or E	3enefi	ciall	v Ov	vned						
											onvertib				,							
1. Title of	2.	3. Transaction	3A. Deeme		4.				6. Date E			7. Title and			8. Price of		9. Number o		11. Nature			
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Date, if any		Transaction Code (Instr				Expiration (Month/D				Amount of Securities		Derivative Security		derivative Securities		Ownership Form:	of Indirect Beneficial		
(Instr. 3) Price of Derivative Security (Month/Day/Year)				8)			Securities `		(monungay, roun)					(Instr. 5)		Beneficially Owned Following		Direct (D) or Indirect (I) (Instr. 4)	Ownership			
						Acquired (A) or						Derivative Security (Instr. :							(Instr. 4)			
					Disposed of (D)			and 4) ´`								Reported Transaction	(e)					
							(Instr. 3, 4										(Instr. 4)					
				L			and 5)															
											Amoun		ount									
								Number														
Coo				Code	l _v	(A)	(D)	Date Exercisal		Expiration Date	Title	of e Sha	res									
<u> </u>							1, ,	1, ,														

Explanation of Responses:

1. George A. Peterkin, Jr., a director of Kirby Corporation, is Trustee of this Trust, and Mr. Peterkin's grandchild is beneficiary of the Trust.

Remarks:

<u>G. Stephen Holcomb, Agent</u> and Attorney-in-Fact

10/17/2005

** 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.