FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

۷	Vash	ington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

Check this box if no longer subject to 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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     MILLER SCOTT P						2. Issuer Name <b>and</b> Ticker or Trading Symbol KIRBY CORP [ KEX ]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owne  Officer (give title Other (spe				ner	
(Last) (First) (Middle) 55 WAUGH DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 03/26/2024								X Officer (give title Other (specify below)  VP - CIO					
SUITE 1000					4. lf	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) HOUSTON TX 77007														X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City) (State) (Zip)					Rı	Rule 10b5-1(c) Transaction Indication													
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date,		Transaction Disposed Code (Instr.		es Acquired (A) or Of (D) (Instr. 3, 4 and 5		5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)		(	(Instr. 4)	
Common Stock, par value \$0.10 per share 03/26/20					2024	.024					6,705	A	\$84.9	7,	705	D			
Common Stock, par value \$0.10 per share 03/26/20					2024				S		6,705	D	\$95.05	95.05 <sup>(1)</sup> 1,000					
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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)	Ow For Dire or I (I) (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Code V		v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares	per								
Employee Stock Options (Right to Buy)	\$84.9	03/26/2024			М			6,705	05/03/20	)22	05/03/2026	Common Stock	6,705	\$0	0		D		

## Explanation of Responses:

1. The reported price is the weighted average sales price. The sales were at prices ranging from \$95.02 to \$95.10 per share. The reporting person will provide, upon request by the commission staff, full information regarding the number of shares sold at each separate price.

Ronald A. Dragg, Agent and Attorney-in-Fact

03/28/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.