FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| Instruc | tion 1(b). | | File | | | | | | urities Exchar Company Act | | | | | liouis | рет гезропзе. | 0.5 |
|---|--|---------------------------------------|-------------------------------|---|---|-----------------------------------|------|--------------------------------------|---|---------------|--|---|---|--|---|-----|
| Name and Address of Reporting Person* O'Neil Christian G. | | | | | 2. Issuer Name and Ticker or Trading Symbol KIRBY CORP [KEX] | | | | | | | all appl Direct | licable) tor | g Person(s) to I 10% O | wner | |
| (Last) (First) (Middle) 55 WAUGH DRIVE, SUITE 1000 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/12/2021 | | | | | | | X | Officer (give title below) | | | |
| (Street) | | | 7007 | 4. If | | | | | | | | i. Indiv ine) X | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (Sta | | Zip) | ative. | Coourie | tion A | | | Nionagad a | | Donofio | بدالمنا | 0 | | | |
| 1. Title of Security (Instr. 3) 2. To Date | | 2. Transaction Date (Month/Day/ | 2A. Deemed Execution Date, | | d Date, | 3. Transaction Code (Instr. | | | | | | 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) | | | |
| Common share | Stock, par | value \$.10 per | 02/12/20 | 21 | | | S | | 2,100 | D \$60.75 | | 54 ⁽¹⁾ | 20,622 | | D | |
| Common share | Stock, par | value \$.10 per | | | | | | | | | | 1,900 I | | | 401(k) | |
| | | Tal | ole II - Deriva (e.g., p | | | | | | sposed of s, converti | | | | Owned | t | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion Date Execution Date (Month/Day/Year) Or Exercise Price of Derivative Security 3. Transaction Execution Date, if any (Month/Day/Year) (Month/Day/Year) 3. Transaction Execution Date, if any (Month/Day/Year) 4. Transact Code (Institute of the code) (Month/Day/Year) 3. Transaction Execution Date, if any (Month/Day/Year) | | saction (| 5. Number of Derivativ Securitie Acquired (A) or Disposed of (D) | nber 6. Date Exercisable and Expiration Date (Month/Day/Year) ties ed | | | Amo Secu Unde Deriv Secu | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) Beneficial Owned Following Reported Transactic | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. The reported price is the weighted average sales price. The sales were at prices ranging from \$60.57 to \$60.95 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.

(D)

(A)

Date Exercisable

Expiration Date

(Instr. 3, 4 and 5)

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

Amount or Number

of Shares

Title

02/12/2021

(Instr. 4)

** 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).

Code

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.