FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES	IN BENEFICIAL	. OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

		Reporting Person* HARLES BE	RDC	N			Name a i				ng Symbol			Relationship theck all appl	icable				
(Last) (First) (Middle) 55 WAUGH DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 04/26/2011								Office	Director Officer (give title below)		10% Owner Other (specify below)				
SUITE 1000					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								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)	(S	tate)	(Zip)																
		Tab	le I -	Non-Deri	vative	e Sec	uritie	s A	cquir	ed, D	isposed o	of, or B	eneficia	ally Owne	d				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/		···	Execution ear) if any								Beneficially Owned Followi		6. Owners Form: Dire (D) or Indi (I) (Instr. 4	ect Indire rect Benef Owne	Indirect Beneficial Ownership (Instr.				
								Ī		v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		4)			
Common Stock, par value \$.10 per share 04/26/201)11	1			A ⁽¹⁾		1,000	A	\$0.00	306,060		D					
Common	Stock, par	value \$.10 per sl	10 per share											200,000		I	Trust	:S ⁽²⁾	
Common	Stock, par	value \$.10 per sl	nare											34,227 I			Partr	Partnerships ⁽³⁾	
Common	Stock, par	value \$.10 per sl	nare											10,111		I	401k	C Plan	
		Т	able								sposed of , converti								
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)				Expiration Day/\(\)		ate	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	deriva Secur Benef Owne Follow Repor	rative crities eficially ed wing orted saction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						
Director Stock Option	\$56.45	04/26/2011			A		6,000		10/26	5/2011	04/26/2021	Commo Stock	6,000	\$56.45		6,000	D		

Explanation of Responses:

- 1. Restricted Stock granted under the 2000 Nonemployee Director Stock Option Plan for Kirby Corporation.
- 2. These shares are owned by trusts for the benefit of members of Mr. Lawrence's family. Mr. Lawrence is not a beneficiary of the trusts, but under their terms, he has the right to acquire the property in the trusts, including the Kirby shares owned by the trusts, by substituting property of equal value.
- 3. The reported shares are held by Lawrence Family Interests, LP, a limited partnership of which entities wholly owned by Mr. Lawrence and his wife are the general partners and of which Mr. Lawrence's children and trusts for their benefit are the limited partners. Mr. Lawrence disclaims beneficial ownership of the shares owned by the limited partnership except to the extent of his pecuniary interest in such shares

Remarks:

G. Stephen Holcomb, Agent and Attorney-in-Fact

04/28/2011

** 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.