HALLADOR ENERGY CO

Form 4

December 18, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

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subject to Section 16. Form 4 or Form 5 obligations

if no longer

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

may continue.

See Instruction

1. Name and Address of Reporting Person *

(First)

(Street)

(State)

Martin Lawrence D

2. Issuer Name and Ticker or Trading

Symbol

HALLADOR ENERGY CO

[HNRG]

(Last)

(Middle)

(Zin)

3. Date of Earliest Transaction

(Month/Day/Year) 12/16/2015

19854 N. STATE HIGHWAY 1

4. If Amendment, Date Original

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

Director 10% Owner Officer (give title __X_ Other (specify below)

below) CFO - Sunrise Coal, LLC

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

MARSHALL, IL 62441

(C:tr.)

| (City) | (State) (| Table Table | e I - Non-D | erivative S | Securi | ties Acq | uired, Disposed o | f, or Beneficial | ly Owned | |
|------------------------|--------------------------------------|-------------------------------|---|---------------|-----------|-------------------------|----------------------------|----------------------------|----------------------|--|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) | | | 5. Amount of Securities | 7. Nature of Indirect | | | |
| (Instr. 3) | • | any | Code | (Instr. 3, 4 | and 5 | 5) | Beneficially | (D) or | Beneficial | |
| | | (Month/Day/Year) | (Instr. 8) | | | | Owned Following | Indirect (I) (Instr. 4) | Ownership (Instr. 4) | |
| | | | | | (A) or | | Reported Transaction(s) | (| (443,41,1) | |
| | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 12/16/2015 | | M | 40,000 (1) | A | \$ 5.36 | 121,464 | D | | |
| Common Stock | 12/16/2015 | | F | 12,760 | D | \$ 5.36 | 108,704 | D | | |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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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. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Securi (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|--------------------------------------|---|--|---|---------------------|--------------------|---|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Martin Lawrence D 19854 N. STATE HIGHWAY 1 MARSHALL, IL 62441

CFO - Sunrise Coal, LLC

Signatures

Lawrence D. Martin 12/18/2015

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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).
- (1) Shares acquired from the vesting of Restricted Stock Units.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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