## Edgar Filing: Davis R Eberley - Form 4

Davis R Eber	ley										
Form 4											
November 16	, 2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									PPROVAL		
	• UNITED	STATES		hington, 1			GE CON	AMISSIO	OMB Number:	3235-0287	
	Check this box						Expires:	January 31,			
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							•	2005 average			
Section 16 Form 4 or		SECURITIES					burden hou	Estimated average burden hours per			
Form 5		rsuant to	Section 16	5(a) of the	Securiti	es Excl	hange A	ct of 1934,	response	0.5	
obligation	$^{\rm s}$ Section 17(			• •			U		on		
may conti See Instru	nue.		of the Inv	•	•	- ·					
1(b).	enon										
(Print or Type R	esponses)										
1 Name and A	dress of Reporting	Person *	2 Isour	Nome and '	Tiolion on 7	Fradina	5 1	Relationshin	of Reporting Per	son(s) to	
1. Name and Address of Reporting Person <u>*</u> Davis R Eberley			2. Issuer Symbol	2. Issuer Name <b>and</b> Ticker or Trading				Issuer			
ALLIANCE RESOURCE											
			PARTN	ERS LP [.	ARLP]			(Che	eck all applicable	e)	
(Last)	(First) (	Middle)	3. Date of	Earliest Tra	nsaction			Director		6 Owner	
			(Month/Day/Year)					XOfficer (give titleOther (specify below)			
	H BOULDER, S	SUITE	11/14/20	017				/	Admin,General	Counsel	
400											
	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check					
	Filed(Mont	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person					
TULSA, OK	74119								More than One Re		
relon, on							Per	son			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	ecuritie	es Acquire	ed, Disposed	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Da				4. Securities		5. A	mount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year		on Date, if	Transactio	nAcquired Disposed			urities	Form: Direct	Indirect	
(Instr. 3)		any (Month	/Day/Year)	Code (Instr. 8)	(Instr. 3,	~ /		eficially ned	(D) or Indirect (I)	Beneficial Ownership	
		(			(		Foll	owing	(Instr. 4)	(Instr. 4)	
						(A)		orted nsaction(s)			
						or	(Ins	tr. 3 and 4)			
Common				Code V	Amount	(D) P	Price				
unit							68,	839	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration I (Month/Day	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (E	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom unit	<u>(1)</u>	11/14/2017		А	617	(2)	(3)	Common unit	617	<u>(3)</u>

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Davis R Eberley 1717 SOUTH BOULDER SUITE 400 TULSA, OK 74119			SVP-Law&Admin,General Counsel				
Signatures							

/s/ R. Eberley Davis by Kenneth Hemm, pursuant to power of attorney dated April 9,	
2013	11/16/2017
<u>**</u> Signature of Reporting Person	Date

## **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) 1 for 1

(2) The Phantom units are to be settled in ARLP common units upon the reporting person's death or termination.

(3) Not applicable

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.