

HELMERICH & PAYNE, INC.

Reported by **HELMERICH HANS**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 11/29/16 for the Period Ending 11/28/16

Address 1437 S. BOULDER AVE. SUITE 1400

TULSA, OK, 74119

Telephone 918-742-5531

CIK 0000046765

Symbol HP

SIC Code 1381 - Drilling Oil and Gas Wells

Industry Oil & Gas Drilling

Sector Energy

Fiscal Year 09/30





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person *					2.	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
HELMERIC	CH HAN	S			Н	elm	erich	& Payn	e, I	nc. [HP]			•			
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							X_Director	X Director 10% Owner Officer (give title below) Other (specify below)			, balanı)	
442 COVEY POVY PED 4445						11/28/2016							Officer (give title below)Officer (specify below)				
1437 SOUTH BOULDER AVE. (Street)				4	TC A				-	1		6. Individual or Joint/Group Filing (Check Applicable Line)					
	(Suc	eet)			4.	II Ar	nendm	ent, Date (Jrigi	nal Fil	ed (MM/	DD/YYYY	6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
TULSA, OK	74119												X Form filed				
(City) (State) (Zip)												Form filed b	Form filed by More than One Reporting Person				
		r	Гable	: I - No	n-De	rivat	ive Sec	curities Ac	equi	red, D	isposed	of, or Be	eneficially Own	ied			
1. Title of Security (Instr. 3)			2. Trans	. Date	2A. D Execu	eemed	3. Trans. Co	ode				5. Amount of Securities Beneficially Following Reported Transaction(s)			6. Ownership	7. Nature of Indirect	
(msu. 3)					Date,		((Instr. 3, 4 and 5)		, T	(Instr. 3 and 4)		\ /	Form:	Beneficial Ownership	
											(4)					or Indirect	(Instr. 4)
								Code	V	Amour	(A) or (D)	Price				(I) (Instr. 4)	
Common Stock				11/28/2	2016			M		20000	A	\$26.895		903505		D	
Common Stock				11/28/2	2016			F		13505	D	\$69.32		890000		D	
Common Stock													1565915		I	Family Trust	
Common Stock														37470		I	By Spouse
Common Stock					21438					I	401(k) Plan						
Common Stock												33600			I	Family Trusts	
	Tab	le II - Deriv	vative	e Secu	rities	Bene	ficially	y Owned (e.g.	, puts	, calls, v	varrants	, options, conv	ertible sec	curities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	Execu	A. Deemed xecution date, if any			5. Number of Derivative Securities Ac (A) or Dispos (D) (Instr. 3, 4 an		r of Expired Acquired posed of		ate Exercisable and ration Date		nd Amount of t Underlying e Security nd 4)	Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Form of	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date	e rcisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	
Employee Stock Option (right to buy)	\$26.895	11/28/2016			M			20000	12/5	5/2007	12/5/2016	Commo Stock	n 20000	\$0.00	0	D	

Explanation of Responses:

(1) The reporting person disclaims beneficial ownership of the shares, and this report should not be deemed an admission that the reporting person is the beneficial owner of the shares for purposes of Section 16 or otherwise.

Reporting Owners

Reporting Owners										
Reporting Owner Name / Address	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer Other							
HELMERICH HANS										
1437 SOUTH BOULDER AVE.	X									
TULSA, OK 74119										

Signatures

Jonathan M. Cinocca, by Power of Attorney for Hans Helmerich

11/29/2016

** 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 control number.