TENGASCO INC Form 4 July 06, 2017

# FORM 4

### OMB APPROVAL

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

OMB Number: 3235-0287

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Expires: January 31, 2005
Estimated average

Form 4 or Form 5 obligations may continue.

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

**SECURITIES** 

burden hours per response... 0.5

5 Relationship of Reporting Person(s) to

See Instruction 1(b).

(Print or Type Responses)

1 Name and Address of Reporting Person \*

SALAS PE	_	2. Issuer Name <b>and</b> Ticker or Trading Symbol					Issuer					
(Last)	(First) (		TENGASCO INC [TGC]  3. Date of Earliest Transaction					(Check all applicable)				
P.O. BOX 16867			(Month/Day/Year) 07/03/2017					Director 10% Owner Officer (give title below) Other (specify below)				
	4	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check					
Filed(Month/Day/Year) FERNANDINA BEACH, FL 32035					)	Applicable Line)  Form filed by One Reporting Person _X_ Form filed by More than One Reporting						
FERNAND.						Person						
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									ially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transaction Code (Instr. 8)	4. SecuritinAcquired Disposed (Instr. 3,	(A) o of (D	))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	07/03/2017			<u>J(1)</u>	500	A	\$0	3,000	D			
Common Stock								5,288,241	I	By Affiliate Partnership		

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.

SEC 1474

(9-02)

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative		e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date Exercisable	Expiration Date	Title	Amount or Number of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SALAS PETER E P.O. BOX 16867 FERNANDINA BEACH, FL 32035 DOLPHIN OFFSHORE PARTNERS LP

P.O. BOX 16867 FERNANDINA BEACH, FL 32035

### **Signatures**

/s/ Dolphin Offshore Partners, L.P. 07/05/2017

\*\*Signature of Reporting Person Date

/s/ Peter E. Salas 07/05/2017

\*\*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) Grant of stock pursuant to Tengasco, Inc.'s Stock Incentive Plan to Peter E. Salas in his individual capacity.
- (2) Held directly by Dolphin Offshore Partners L. P. Peter E. Salas, the chairman of Tengasco Inc.'s Board of Directors, is the sole shareholders and controlling person of Dolphin Mgmt. Services, Inc., the managing general partner of Dolphin Offshore Partners, L.P.

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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