FORM 4	4
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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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02)

#### 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

(Print or Type Responses)								1		
1. Name and Address of Reportin FOSTER VINCENT D	2. Issuer Na Main Stree			or Trading Syı P [MAIN]	nbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director10% Owner X_ Officer (give title below) Other (specify below) Chairman and CEO				
1300 POST OAK BLVD., S	3. Date of Ea 10/14/2016		sactio	on (Month/Day	/Year)					
(Street)	4. If Amendr	nent, Date	Origi	nal Filed(Month	/Day/Ye	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
HOUSTON, TX 77056									ing renson	
(City) (State) (Zip) <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b>										
1.Title of Security (Instr. 3)	Date (Month/Day/Year)		Code (Instr. 8)	ction	or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial
		(Month/Day/Year	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) O or Indirect (II (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	10/14/2016		J <u>(1)</u>	v	7.403	А	\$ 34.16	1,535,337.6569	D	
Common Stock	10/14/2016		J <u>(1)</u>	v	2,123.8891	А	\$ 34.16	1,537,461.5459	D	
Common Stock	10/14/2016		J <u>(1)</u>	v	78.3736	А	\$ 34.16	14,549.8999	I	By Foster Irrevocable Trust (2)
Common Stock								30,000	Ι	By MS I (2)
Common Stock								30,000	Ι	By MS II (2)
Common Stock								30,000	Ι	By MS III (2)

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

Persons who respond to the collection of information SEC 1474 (9contained 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)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	Numbe	r 6. Date Exe	rcisable	7. Ti	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of	Ĩ	and Expirati	ion Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	D	erivativ	e (Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Se	ecurities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				A	cquired			(Instr	r. 3 and		Owned	Security:	(Instr. 4)
	Security				(A	A) or			4)			0	Direct (D)	
					D	isposed						Reported	or Indirect	
						f(D)						Transaction(s)	< / </td <td></td>	
					~	nstr. 3,						(Instr. 4)	(Instr. 4)	
					4,	and 5)								
										Amount				
							_			or				
							Date	Expiration	Title	Number				
							Exercisable	Date		of				
				Code V	0	A) (D)				Shares				
					(4	(2)								

## **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
FOSTER VINCENT D 1300 POST OAK BLVD. STE. 800 HOUSTON, TX 77056	Х		Chairman and CEO					

### Signatures

# **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) The reporting person acquired these shares under a dividend reinvestment plan, pursuant to a dividend reinvestment transaction exempt from Section 16 under Rule 16a-11.

(2) Family trust.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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