Edgar Filing: HERZFELD THOMAS J - Form 4

| | O THOMAS J | | | | | | | | | | | |
|---|---------------------|---|--------------------------------|--------------------------------------|-------------|------------------------|----------------|--|---------------------|-------------------------|--|--|
| Form 4 | 2010 | | | | | | | | | | | |
| October 25, | | | | | | | | | | | | |
| FORM | | SECU | DITIES A | | പ | NCEC | OMMISSION | OMB APPROVAL | | | | |
| Washington, D.C. 20549 | | | | | | OMMINISSION | OMB Number: | 3235-0287 | | | | |
| Check th | nis box | | •• a | sinington | , D.C. 20 | 549 | | | | January 31, | | |
| if no lon | - NIATHA | AENT O | F CHAN | IGES IN | BENEF | ICIA | LOWN | JERSHIP OF | Expires: | 2005 | | |
| subject t Section | 0 | | | NGES IN BENEFICIAL OWN SECURITIES | | | | | Estimated average | | | |
| Form 4 of | | | | 51001 | SECONTIES | | | | burden hou response | rs per 0.5 | | |
| Form 5 | Filed pur | suant to S | Section 1 | 16(a) of th | ne Securit | ies E | xchange | Act of 1934, | 100001100 | 0.0 | | |
| obligatio | ons Section 17(| | | | | | U | 1935 or Section | 1 | | | |
| may con <i>See</i> Instr | unue. | | | nvestment | • | · · | | | | | | |
| 1(b). | | | | | _ | | | | | | | |
| | | | | | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> HERZFELD THOMAS J | | | 2. Issue | er Name an o | d Ticker or | Tradiı | ng | 5. Relationship of Reporting Person(s) to | | | | |
| | | | Symbol | | | | | Issuer | | | | |
| | HERZI | FELD CA | RIBBEA | N BA | ASIN | (Chaok all applicable) | | | | | | |
| | | | FUND INC [CUBA] | | | | | (Check all applicable) | | | | |
| (Last) | (First) (1 | Middle) | 3. Date of | of Earliest T | ransaction | | | _X_ Director | | Owner | | |
| (1 | | | (Month/I | Day/Year) | | | | Officer (give title Other (specify below) below) | | | | |
| | | | 10/23/2 | 2018 | | | | | | | | |
| | ND INC, 119 | | | | | | | | | | | |
| | TON AVENUE, | SUITE | | | | | | | | | | |
| 504 | | | | | | | | | | | | |
| (Street) | | | 4. If Amendment, Date Original | | | | | 6. Individual or Joint/Group Filing(Check | | | | |
| | | | Filed(Mo | onth/Day/Yea | r) | | | Applicable Line) | | | | |
| | | | | | | | | _X_ Form filed by O Form filed by M | | | | |
| MIAMI BE | EACH, FL 33139 | | | | | | | Person | | 1 0 | | |
| (City) | (State) | (Zip) | Tab | le I - Non-l | Derivative | Secur | ities Acqu | iired, Disposed of, | or Beneficial | ly Owned | | |
| 1.Title of | 2. Transaction Date | | | 3. | 4. Securiti | ies Ac | quired (A) |) 5. Amount of | 6. | 7. Nature of | | |
| Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | | Code (Instr. 3, 4 and 5) | | | | Securities | Ownership | Indirect | | |
| (Instr. 3) | | | | | | | | Beneficially Owned | Form: Direct (D) | Beneficial Ownership | | |
| | | (WOIIII/L | ay/icai) | (111501.0) | | | | Following | or Indirect | (Instr. 4) | | |
| | | | | | | (A) | | Reported | (I) | · · · | | |
| | | | | | | or | | Transaction(s) | (Instr. 4) | | | |
| | | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | | |
| Common Stock | 10/23/2018 | | | Р | 20,000 | А | \$ 5.8395 | 483,255 | 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.

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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) | 4. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and unt of rlying rities . 3 and 4) | 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 | | | |
| HERZFELD THOMAS J THE HERZFELD CARIBBEAN BASIN FUND INC 119 WASHINGTON AVENUE, SUITE 504 MIAMI BEACH, FL 33139 | | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Thomas J. Herzfeld | 10/25/2018 | | | | | | | |
| <u>**</u> Signature of | Date | | | | | | | |

<u>**</u>Signature of Reporting Person

e of erson

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).

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.