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Form 4												
February 19									OME	B APPROVAL		
FORM	/1 4 UNITED	STATES		RITIES . shingtor			NGE (COMMISSIO		3235-0287		
Check the	aar			C					Expires:	January 31,		
if no lon subject t Section Form 4	to STATEN 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Estimated average burden hours per response 0.		
Form 5 obligatio may cor <i>See</i> Instr 1(b).	ons Section 17(a) of the I	Public U		lding Co	mpan	y Act of	e Act of 1934, f 1935 or Secti 40				
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> CRAIGE JAMES E			2. Issuer Name and Ticker or Trading Symbol Stone Harbor Emerging Markets Income Fund [EDF]					5. Relationship of Reporting Person(s) to Issuer				
								(Check all applicable)				
INVESTM	(First) (1 E HARBOR ENT PARTNERS ID STREET 16TH			of Earliest 7 Day/Year) 2019	Fransactio	n		Director X Officer (gi below) Execu				
FLOOR												
	(Street)			endment, D onth/Day/Yea	-	nal		6. Individual or Applicable Line) _X_ Form filed by	One Reportin	g Person		
NEW YOR	RK, NY 10019							Form filed by Person	More than On	e Reporting		
(City)	(State)	(Zip)	Tab	le I - Non-	Derivativ	e Secur	ities Acq	uired, Disposed	of, or Benefi	cially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transacti Code (Instr. 8)	(Instr. 3	(A) or	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 Shares of Beneficial Interest				Code	7 miloun	(D)	Thee	24,834	D			
Common Shares of Beneficial Interest								9,643	I	By Family		
	02/15/2019			S	11,731	D		4,253	Ι			

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Common Shares of	\$ 13.36	Descendants' Trust
Beneficial		
Interest		

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)

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)	of		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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					
I B			10% Owner	Officer	Other		
CRAIGE JAMES E C/O STONE HARBOR INVESTMENT PARTNERS LP 31 WEST 52ND STREET 16TH FLOOR NEW YORK, NY 10019				Executive Vice President			
Signatures							
/s/ James E. Craige	02/19/2019						

<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). 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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