

Plotkin Ben A  
Form 5  
February 13, 2018

# FORM 5

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

OMB APPROVAL

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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).  
Form 3 Holdings Reported Form 4 Transactions Reported

**ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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

|   |         |          |  |   |
|---|---------|----------|--|---|
| 1. Name and Address of Reporting Person * |         |          | 2. Issuer Name and Ticker or Trading Symbol                  | 5. Relationship of Reporting Person(s) to Issuer  |
| Plotkin Ben A                             |         |          | STIFEL FINANCIAL CORP [SF]                                   | (Check all applicable)  |
| (Last)                                    | (First) | (Middle) | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) | <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner  |
| 787 7TH AVENUE                            |         |          | 12/31/2017   | <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) |
| (Street)                                  |         |          | 4. If Amendment, Date Original Filed(Month/Day/Year)         | Vice Chairman and SVP   |
| NEW YORK, NY 10019                        |         |          |  | 6. Individual or Joint/Group Reporting (check applicable line)  |
| (City)                                    | (State) | (Zip)    |  | <input checked="" type="checkbox"/> Form Filed by One Reporting Person  |
|   |         |          |  | <input type="checkbox"/> Form Filed by More than One Reporting Person   |

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Ownership (Instr. 4) |
|---------------------------------|--------------------------------------|--|--------------------------------|---|--|--|-----------------------------------|
|                                 |                                      |  |                                | (A) or (D) Price  |  |  |                                   |

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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Underlying Security (Instr. 3 and 4) |
|--|------------------------------------|--------------------------------------|--|--------------------------------|-------------------------|--|---|--|
|  |                                    |                                      |  |                                |                         |  |   |  |

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| Derivative Security |      |            |   |   | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) |     | Date Exercisable | Expiration Date | Title        | Amount or Number of Shares |      |
|---------------------|------|------------|---|---|---|-----|------------------|-----------------|--------------|----------------------------|------|
|                     | (A)  | (D)        |   |   | (A)   | (D) |                  |                 |              |                            |      |
| Phantom Stock Units | \$ 0 | 09/15/2017 | Â | A | 62  | Â   | Â (1)            | Â (1)           | Common Stock | 62                         | \$ 0 |
| Phantom Stock Units | \$ 0 | 12/15/2017 | Â | A | 52  | Â   | Â (1)            | Â (1)           | Common Stock | 52                         | \$ 0 |

## Reporting Owners

| Reporting Owner Name / Address                        | Relationships |           |                         |       |
|---|---------------|-----------|-------------------------|-------|
|   | Director      | 10% Owner | Officer                 | Other |
| Plotkin Ben A<br>787 7TH AVENUE<br>NEW YORK, NY 10019 | Â             | Â         | Â Vice Chairman and SVP | Â     |

## Signatures

Ben A. Plotkin                      02/13/2018

\_\_Signature of                      Date  
Reporting Person

## 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) Phantom stock units acquired pursuant to dividend equivalent rights in respect of previously reported phantom stock units (the "Dividend Equivalent PSUs"). The Dividend Equivalent PSUs accrued in connect with a cash dividend paid by the issuer on the issuer's common stock. The Dividend Equivalent PSUs will vest proportionately with the phantom stock units to which they relate. The Dividend Equivalent PSUs convert to the issuer's common stock on a one-for-one basis.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.