STIFEL FINANCIAL CORP

Form 4 May 30, 2007

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

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations

(Print or Type Responses)

may continue. See Instruction 1(b).

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 *

OATES JAMES M

(First) (Middle) (Last)

(State)

(Zip)

2. Transaction Date 2A. Deemed

522 LAKESHORE DRIVE

(Street)

ELKINS, NH 03233

(City)

1.Title of

Security

(Instr. 3)

(Instr. 3)

2. Issuer Name and Ticker or Trading

Symbol

STIFEL FINANCIAL CORP [SF] 3. Date of Earliest Transaction

(Month/Day/Year) 05/30/2007

4. If Amendment, Date Original

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities

(Month/Day/Year) Execution Date, if TransactionAcquired (A) or Code Disposed of (D) (Month/Day/Year) (Instr. 8)

(Instr. 3, 4 and 5)

Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (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.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion Security or Exercise

Price of

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if (Month/Day/Year)

4. 5. TransactionNumber Code of (Instr. 8) Derivative

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of 8. Pri **Underlying Securities** (Instr. 3 and 4)

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

6. Individual or Joint/Group Filing(Check

6. Ownership

Form: Direct

(Instr. 4)

(D) or Indirect Beneficial

(Check all applicable)

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

SEC 1474

(9-02)

Indirect

Issuer

below)

5. Amount of

Securities

Following

Owned

Beneficially

X_ Director

Applicable Line)

Officer (give title

Estimated average

burden hours per

Deriv Secu (Insti

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| | Derivative Security | | | Acq (A) of Disp of (I (Inst | osed O) | | | | |
|---------------------------------------|------------------------|------|---|---|------------|---------------------|--------------------|-----------------|--|
| | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Phantom Stock Units | \$ 0 | | | | | 01/01/2004 | 01/01/2014 | Common Stock | 618 |
| Stock Option (Option to Buy) | \$ 8.7 | | | | | <u>(1)</u> | 01/30/2013 | Common Stock | 266 |
| Stock Option (Option to Buy) | \$ 13.89 | | | | | <u>(2)</u> | 02/03/2014 | Common Stock | 532 |
| Stock Option (Option to Buy) | \$ 20.22 | | | | | <u>(3)</u> | 01/03/2015 | Common Stock | 600 |
| Stock Option (Option to Buy) | \$ 38.25 | | | | | <u>(4)</u> | 01/03/2016 | Common Stock | 800 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| • | Director | 10% Owner | Officer | Other | | | |
| OATES JAMES M 522 LAKESHORE DRIVE ELKINS, NH 03233 | X | | | | | | |

Signatures

By: Forrest M. Smith For: James M. O5/30/2007 Oates

**Signature of Reporting Person Date

Reporting Owners 2

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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) Currently exercisable.
- (2) Options vest in 20% increments yearly from the grant date.
- (3) Options vest in 20 percent increments on 1/3/06, 1/3/07, 1/3/08, 1/3/09 and 1/3/10.
- (4) Options vest in 20% increments on 1/3/07, 1/3/08, 1/3/09, 1/3/10 and 1/3/11.

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.