Stone Harbor Emerging Markets Total Income Fund Form 4 November 08, 2016

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FORM	Λ4					CTT I	NGE			B APPROVAL	_	
	UNITED	STATES		RITIES A shington			NGE (COMMISSIO	N OMB Number	: 3235-0)287	
Check the check									Expires:	January		
subject Section Form 4	F CHANGES IN BENEFICIAL OW SECURITIES					NERSHIP OI	Estimate burden l	Expired: 200 Estimated average burden hours per response 00				
Form 5 obligation may cor <i>See</i> Inst 1(b).	ons ntinue. Section 17((a) of the	Public U		lding Coi	npan	y Act of	ge Act of 1934, f 1935 or Secti 40				
(Print or Type	Responses)											
				2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
			Stone Harbor Emerging Markets Total Income Fund [EDI]					(Check all applicable)				
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					Director 10% Owner X Officer (give title Other (specify				
INVESTM	E HARBOR ENT PARTNERS ID STREET 16TI		11/04/2	-				below) Exect	below) ative Vice Pre			
	(Street)		4. If Am	endment, D	Date Origina	ıl		6. Individual or	Joint/Group I	Filing(Check		
NEW YOR	RK, NY 10019		Filed(Mo	onth/Day/Yea	ar)			Applicable Line) _X_Form filed by Form filed by Person	One Reportin More than One			
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secur	rities Aco	uired, Disposed	of, or Benefi	cially Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, 1 any (Month/Day/Year)			ned 1 Date, if	3. 4. Securities Acquired te, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Year) (Instr. 8) (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
Common				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Shares of Beneficial Interest	11/04/2016			Р	750	A	\$ 13.94	7,809 <u>(1)</u>	D			
Common Shares of Beneficial Interest	11/04/2016			Р	750	A	\$ 13.94	41,951 <u>(2)</u>	Ι	By Family	Ţ	
	11/04/2016			Р	13,753	А		19,356 <u>(3)</u>	I			

Common Shares of	\$ 13.94	Descendants' Trust
Beneficial	15.7 +	11450
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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships					
			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	11/08/2016						

<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).
- (1) Includes 2,733 shares acquired through a dividend reinvestment plan.

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(2) Includes 12,065 shares acquired through a dividend reinvestment plan.

(3) Includes 603 shares acquired through a dividend reinvestment plan.

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.