

Whelan Timothy J  
 Form 3  
 February 12, 2018

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Whelan Timothy J		(Month/Day/Year)	ALLIANCE RESOURCE PARTNERS LP [ARLP]	
(Last)	(First)	(Middle)	02/08/2018	
1717 SOUTH BOULDER AVENUE,Â SUITE 400			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
TULSA,Â OKÂ 74119			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			Senior Vice President Sales	<input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common unit	20,223	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Restricted unit	Â (2)	Â (2)	Common unit	39,256	\$ (1)	D	Â
Restricted unit	Â (3)	Â (3)	Common unit	21,822	\$ (1)	D	Â
Restricted unit	Â (4)	Â (4)	Common unit	25,100	\$ (1)	D	Â
Phantom unit	Â (5)	Â (5)	Common unit	5,378	\$ (1)	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Whelan Timothy J 1717 SOUTH BOULDER AVENUE SUITE 400 TULSA, OK 74119	Â	Â	Â Senior Vice President Sales	Â

## Signatures

/s/ Timothy Whelan, by Kenneth Hemm, pursuant to power of attorney dated February 6, 2018

02/12/2018

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 5(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) 1 for 1

(2) The restricted units will vest on January 1, 2019 provided that the issuer meets certain financial tests. Once vested, the restricted units are to be settled in ARLP units.

(3) The restricted units will vest on January 1, 2020 provided that the issuer meets certain financial tests. Once vested, the restricted units are to be settled in ARLP units.

(4) The restricted units will vest on January 1, 2021 provided that the issuer meets certain financial tests. Once vested, the restricted units are to be settled in ARLP units.

(5) The Phantom units are to be settled in ARLP common units upon the reporting person's death or termination.

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.