

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person* <u>Fitzgerald Robert N</u> (Last) (First) (Middle) 6120 SOUTH YALE AVE. SUITE 700 (Street) TULSA OK 74136 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>SemGroup Corp [SEMG]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) SVP and CFO
	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2016	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

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 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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	09/30/2016		A		18,236 ⁽¹⁾	A	\$0.00 ⁽¹⁾	70,148 ⁽²⁾	D	
Common Stock								10	I	By Son

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date					
					Code	V	(A)	(D)	Title	Amount or Number of Shares			

Explanation of Responses:

1. On September 30, 2016, pursuant to an Agreement and Plan of Merger entered into by Rose Rock Midstream, L.P. ("RRMS"), Rose Rock Midstream GP, LLC, SemGroup Corporation ("SemGroup"), and PBMS, LLC: (1) each outstanding common unit representing limited partner interests in RRMS held by the Reporting Person converted into 0.8136 (the "Exchange Ratio") shares of SemGroup Class A common stock (the "Common Unit Exchange") and (2) each outstanding RRMS restricted unit award held by the Reporting Person converted into an award with respect to shares of SemGroup based on the Exchange Ratio, subject to the same vesting and forfeiture provisions as were applicable to such RRMS restricted unit award (the "Restricted Unit Exchange"). As a result of the Merger Exchange and Restricted Unit Exchange, SemGroup issued the common stock reported on Table 1 to the Reporting Person.

2. Includes 529 shares of Common Stock purchased under the Company's Employee Stock Purchase Plan since the reporting persons last Form 4 filing.

Remarks:

Candice L. Cheeseman, Power
of Attorney for Robert N. Fitzgerald 09/30/2016

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* 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.

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 Number.