## Edgar Filing: SHUTTERFLY INC - Form 4

SHUTTERF Form 4	<sup>4</sup> LY INC										
March 03, 2	017										
FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287	
Check th	cor	о ,								January 31,	
Subject to Section 16. Form 4 or				NGES IN BENEFICIAL OWNERSH SECURITIES				ERSHIP OF	Expires: 200 Estimated average		
									burden hou	•	
							- 1		response	0.5	
obligatio							U	Act of 1934,			
may con	tinue. Section 17(			•	•	-	ct of 1940	1935 or Section	l		
<i>See</i> Instr 1(b).	ruction	50(II)		ivestillen	t Compa			)			
1(0).											
(Print or Type	Responses)										
								5. Relationship of Reporting Person(s) to			
Wiley Rola	nd Karl		Symbol					Issuer			
			SHUT	FERFLY INC [SFLY]				(Check all applicable)			
(Last)	(First) (I	Middle)		f Earliest T	Transactio	n					
								Director 10% Owner X Officer (give title Other (specify below) below) SVP and General Manager			
C/O SHUTTERFLY, INC., 2800 03/01/2 BRIDGE PARKWAY											
DRIDUE FAREWAI											
			onth/Day/Year)				6. Individual or Joint/Group Filing(Check				
Filed(Mor							Applicable Line) _X_ Form filed by One Reporting Person				
REDWOO	D CITY, CA 9400	65						Form filed by M Form filed by M			
(City)	(State)	(Zip)			<b>D</b> • 4•	G					
	. ,						_	ired, Disposed of,		-	
1.Title of Security	2. Transaction Date (Month/Day/Year)			3. 4. Securities Acquired (A) Transaction Disposed of (D)				5. Amount of Securities	6. Ownership	7. Nature of Indirect	
(Instr. 3)	(Wonth/Day/Tear)	any (Month/Day/Year)		Code (Instr. 3, 4 and 5) (Instr. 8)				Beneficially	Form:	Beneficial	
· · ·								Owned	Direct (D) 0	Ownership	
								Following Reported	or Indirect (I)	(Instr. 4)	
						(A)		Transaction(s)	(I) (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
C					. mouli		\$				
Common Stock	03/01/2017			S <u>(1)</u>	7,605	D	45.5168	0	D		
Stoon							(2)				

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)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Wiley Roland Karl C/O SHUTTERFLY, INC. 2800 BRIDGE PARKWAY REDWOOD CITY, CA 94065			SVP and General Manager					
Signatures								
/s/ Jason Sebring, Attorney-in-Fact	(	03/03/2017						
**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) This transaction was effected pursuant to a Rule 10b5-1 trading plan previously adopted by the reporting person.

Represents a weighted average sales price per share. These shares were sold in multiple transactions at prices ranging from \$45.19 to \$45.94 per share. The Reporting Person has provided to the Issuer, and undertakes to provide to the staff of the Securities and Exchange

(2) Commission or any security holder of the Issuer, upon request, full information regarding the number of shares purchased at each separate price within the range.

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.