### Edgar Filing: Vice Charles A - Form 4

Form 4 November 03											
FORM	Л	TATES	SECUD	ITIES A	ND EV	~ <b>Ц</b> А	NCFC	OMMISSION		PROVAL	
<i>.</i>	DIALES		hington,			NGEU		OMB Number:	3235-0287		
Check thi if no long subject to Section 10 Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	buant to Solution of the P	CHAN ection 16 ublic Ut	GES IN I SECUR	BENEF ITIES e Securit ling Con	I <b>CIA</b> ies E npany	NERSHIP OF e Act of 1934, 1935 or Section 0	January 31, Expires: 2005 Estimated average burden hours per response 0.5				
(Print or Type R	Responses)										
1. Name and Address of Reporting Person <u>*</u> Vice Charles A			2. Issuer Name and Ticker or Trading Symbol INTERCONTINENTALEXCHANGE INC [ICE]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 2100 RIVEREDGE PARKWAY, SUITE 500			3. Date of Earliest Transaction (Month/Day/Year) 11/01/2010					Director 10% Owner X Officer (give title Other (specify below) below) President & Chief Op. Officer			
				ndment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
ATLANTA,	GA 30328							Person	fore than One R	eporting	
(City)	(State) (State)	Zip)	Table	e I - Non-D	erivative	Securi	ities Acqu	uired, Disposed of	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	11/01/2010			M	4,000	A	\$ 80.17	54,833	D		
Common Stock	11/01/2010			S <u>(1)</u>	4,000	D	\$ 114.4 (2)	50,833	D		

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.

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# 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. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	of Derivative Expiration Date Securities (Month/Day/Year) Acquired A) or Disposed of D) Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 1 5 (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (right to buy)	\$ 80.17	11/01/2010		М	4,000	(3)	12/16/2018	Common Stock	4,000	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Vice Charles A 2100 RIVEREDGE PARKWAY SUITE 500 ATLANTA, GA 30328			President & Chief O	p. Officer			
Signatures							
/s/ Andrew J. Surdykowski,		11/03	/2010				

Attorney-in-fact	11/03/20		
**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) The sales reported in this Form 4 were effected pursuant to a pre-arranged trading plan established in accordance with Rule 10b5-1 of the Securities Act of 1934, as amended.

The price range for the aggregate amount sold by the direct holder is \$114.00 -\$114.69. The Issuer will upon request by the Staff of the(2) U.S. Securities and Exchange Commission or a security holder of the Issuer provide the full information regarding the number of shares sold at each separate price.

(3) These options are fully vested.

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.

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