Edgar Filing: Sands Anita M - Form 4

Sands Anita Form 4											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB AF OMB Number:	PROVAL 3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). StateMent of Changes in Beneficial StateMent of Changes in Beneficial Section 16. Filed pursuant to Section 16(a) of the Securities Exc Section 17(a) of the Public Utility Holding Company Act of 30(h) of the Investment Company Act of						Exchange by Act of	DWNERSHIP OF Estimated average burden hours per response Expires: Jan Estimated average burden hours per response				
(Print or Type	Responses)										
Sands Anita M Symbol			Symbol					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mon				e of Earliest Transaction h/Day/Year) 7/2017				X_ Director 10% Owner Officer (give title Other (specify below) below)			
				onth/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
MOUNTAI	IN VIEW, CA 94	043					1	Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	Code (Instr. 8)	4. Securi por Dispos (Instr. 3, Amount	sed of 4 and (A) or		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)	
Common Stock	07/17/2017			S <u>(1)</u>	2,000 (2)	D	\$ 30.3985 (3)	41,386	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.

 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own 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				
Sands Anita M 350 ELLIS STREET MOUNTAIN VIEW, CA 94043	Х							
Signatures								
/s/ Eunice Kim, as attorney-in-fac Sands	07/18/2017							
<u>**</u> Signature of Reporting Pe	Date							

**Signature of Reporting Person

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).
- The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 15, (1) 2017.
- (2) Represents the aggregate of sales effected on the same day at different prices pursuant to the plan in footnote (1).
- Represents the weighted average sales price per share. The shares sold at prices ranging from \$30.08 to \$30.52 per share. Full information (3) regarding the number of shares sold at each price shall be provided upon request to the staff of the U.S. Securities and Exchange Commission, the Issuer, or a security holder of the Issuer.

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.