Edgar Filing: CHEGG, INC - Form 4

CHEGG INC

Form 4											
April 14, 201	1	о статес	SECUD	TTIES A		141	NCE	COMMISSION		PPROVAL	
		DSIAIES		hington,			NGE (OMB Number:	3235-0287	
Check thi if no long subject to Section 10 Form 4 or	er STATE 6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES							Expires: January 31 2005 Estimated average burden hours per response 0.5		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	^{is} Section 1'	7(a) of the		ility Hold	ing Com	pany	Acto	e Act of 1934, f 1935 or Sectio 40	n		
(Print or Type R	lesponses)										
GEIGER CHARLES Symbo			Symbol	uer Name and Ticker or Trading bl GG, INC [CHGG]				5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. Date (Month				e of Earliest Transaction n/Day/Year) /2016				(Check all applicable) <u></u> Director 10% Owner <u></u> Officer (give title Other (specify below) CHIEF PRODUCT OFFICER			
	(Street)			ndment, Dat th/Day/Year)				6. Individual or Jo Applicable Line) _X_ Form filed by 0	One Reporting Pe	erson	
SANTA CL	ARA, CA 9503	54						Form filed by M Person	Iore than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	spose	d of 5) Price	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	04/12/2016			F <u>(1)</u>	64	D	\$ 4.41	474,070	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	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. onNumber	6. Date Exer Expiration D		7. Titl Amou		8. Price of Derivative	9. Nu Deriv
Security	or Exercise	(Woldlin Day Tear)	any	Code	of	(Month/Day		Under		Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	· ·)	Securi		(Instr. 5)	Bene
	Derivative		· · ·		Securities	;		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
				<u> </u>					of		
				Code V	(A) (D)				Shares		
Popol	tina O	whore									

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director 10% Owner		Officer	Other				
GEIGER CHARLES C/O CHEGG, INC 3990 FREEDOM CIR SANTA CLARA, CA 95054			CHIEF PRODUCT OFFICER					
Signatures								
/s/ Charles F. Geiger by Dave Borders, Attorney-in-Fact			04/14/2016					
**Signature of Reporting	g Person		Date					
Explanation of Da	onon	~~~						

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).

Exempt transaction pursuant to Section 16b-3(e) - payment of exercise price or tax liability by delivering or withholding securities incident to the receipt, exercise or vesting of a security issued in accordance with Rule 16b-3. All of the shares reported as disposed of in

(1) this Form 4 were relinquished by the Reporting Person and cancelled by the Issuer in exchange for the Issuer's agreement to pay federal and state tax withholding obligations of the Reporting Person resulting from the vesting of RSUs. The Reporting Person did not sell or otherwise dispose of any of the shares reported on this Form 4 for any reason other than to cover required taxes.

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.