Edgar Filing: MINCKS JAY E - Form 4

MINCKS JA	YE											
Form 4												
January 02, 2	2018											
FORM	ПЛ									OMB AF	PROV	AL
	UNITE	O STATES		RITIES A shington				NGE C	COMMISSION	OMB Number:	3235	-0287
Check th				-						Expires:	Janua	-
if no long subject to		MENT O	F CHAN	GES IN	GES IN BENEFICIAL OWNERSHI					•	vorago	2005
Section 1		SECURITIES								Estimated average burden hours per		
Form 4 o										response	response 0.	
Form 5 obligatio	-							-	e Act of 1934,			
may cont				•		•	· ·		1935 or Section	1		
See Instr		30(h)	of the In	vestmen	t (Compan	y Ac	t of 194	-0			
1(b).												
(Print or Type I	Responses)											
1. Name and Address of Reporting Person * 2. Issuer Name MINCKS JAY E Symbol INSPERITY				r Name an	d ′	Ticker or	Tradiı	ıg	5. Relationship of Reporting Person(s) to			
									Issuer			
				PERITY, INC. [NSP]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	f Earliest T	'ra	nsaction			(Chech	t all applicable)	
				Day/Year)					Director 10% Owner			
19001 CRESCENT SPRINGS 12/28/20				-					XOfficer (give titleOther (spectrum) below)			ecify
DRIVE									· · · · · · · · · · · · · · · · · · ·	Sales & Market	ing	
	(Street)		4 If Ame	ndmant D	hat	o Origina	1				-	
			Amendment, Date Original d(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)				
Filed(Mon									_X_ Form filed by One Reporting Person			
KINGWOO	D, TX 77339								Form filed by M	ore than One Re	porting	
									Person			
(City)	(State)	(Zip)	Tabl	e I - Non-	De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owne	ed
1.Title of	2. Transaction Da	ate 2A. Deer	med	3.		4. Securi			5. Amount of	6. Ownership		
Security	(Month/Day/Yea	r) Executio any	on Date, if			n(A) or Di	•		Securities	Form: Direct		
(Instr. 3)		Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)						Beneficially Owned	(D) or Indirect (I)	Benefic Owners		
		(monun	Duy, I cui)	(1130.0)					Following	(Instr. 4)	(Instr. 4	
							(A)		Reported			
							(A) or		Transaction(s)			
				Code V	7	Amount		Price	(Instr. 3 and 4)			
Common Stock	12/28/2017			F <u>(1)</u>		7,701	D	\$ 56.85	38,465 <u>(2)</u>	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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Under 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				
MINCKS JAY E 19001 CRESCENT SPRINGS DRIVE KINGWOOD, TX 77339			EVP of Sales & Marketing					
Signatures								
/s/ Daniel D. Herink, by Power of Attorney		01/02/2018						
**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) Payment of tax liability by withholding securities incident to the vesting of a restricted stock award.
- (2) This amount includes additional shares of common stock issued in connection with the Company's previously announced 2-for-1 stock split, which was completed on December 18, 2017.

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.