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TDUDANION INC

TRUPANI	ON INC.											
Form 4												
August 09,	2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
	Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check t									Expires:	January 31,		
subject to STATEMENT OF CHANGES IN BENEFICIA						ICIA	AL OWN	ERSHIP OF	Estimated average			
0	Section 16. SECURITIES								burden hours per			
	Form 4 or								response 0.5			
Form 5 obligati							•	Act of 1934,				
may con				•	•	-	•	935 or Section				
See Inst	ruction	30(h)	of the I	nvestmen	t Compai	ny Ao	ct of 1940					
1(b).												
(Print or Type	Responses)											
(I lint of Type	(Responses)											
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of							5. Relationship of I	Reporting Person(s) to				
RUBIN HO	· –	Symbol				0	Issuer					
	TRUPANION INC. [TRUP]											
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)				
(Last) (First) (Middle)			(Month/Day/Year)					_X_ Director10% Owner				
C/O TRUF	PANION, INC., 6	08/05/2016				-	Officer (give title Other (specify					
AVENUE	SOUTH, SUITE	200					t	pelow)	below)			
(Street)			4. If Amendment, Date Original				e	6. Individual or Joint/Group Filing(Check				
					d(Month/Day/Year)				Applicable Line)			
						-		One Reporting Person				
SEATTLE, WA 98108								Form filed by More than One Reporting Person				
(City)	(State)	(Zip)				~						
(eng)	(State)	(Eip)	Tat	ole I - Non-	Derivative	Secu	rities Acqui	ired, Disposed of,	or Beneficial	y Owned		
1.Title of	2. Transaction Date	1 、					· · ·	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)		Date, 1f					Securities Beneficially	Ownership Form:	Indirect Beneficial		
(1130.5)	(Instr. 3) any Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8)				5)	Owned	Direct (D)	Ownership				
			•					Following	or Indirect	(Instr. 4)		
						(A)		Reported	(I) (In star 4)			
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
				Code V	Amount	(D)	Price	(
Common	08/05/2016			S	15 000	D	\$ 15.0117	110.000	D			
Stock	08/05/2016			3	15,000	D	15.0117 (1)	110,000	D			
							<u>(+)</u>					
Common	08/08/2016			S	1,300	D	\$ 15	108,700	D			
Stock				~	1,000	_	<i>\</i>	100,100	-			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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				
RUBIN HOWARD E C/O TRUPANION, INC. 6100 4TH AVENUE SOUTH, SUITE 200 SEATTLE, WA 98108	Х							
Signatures								
/s/ Charlotte Sim-Warner as attorney-in-fact for Howard E. 08/0								

**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 reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$15.00 to \$15.07 per share, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the (1) Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the

range set forth in this footnote (1). 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.

Date