Edgar Filing: BEZOS JEFFREY P - Form 4

BEZOS JEF	FREY P											
Form 4												
August 21, 2	017											
FORM	14										PPROVAL	
	UNITED S	STATES				ND EXC D.C. 205		NGE (COMMISSION	OMB Number:	3235-0287	
Check the				0	,					Expires:	January 31,	
if no long subject to		IENT O	F CHAN	GES I	N B	ENEFI	CIAI	LOW	NERSHIP OF	Estimated average burden hours per		
Section 1				SECU	JRI	TIES						
Form 4 o	r									response	•	
Form 5	Filed pure	suant to	Section 16	6(a) of	the	Securiti	es Ex	chang	ge Act of 1934,			
obligation may cont				•		•	- ·		f 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestme	ent C	Company	y Act	of 194	40			
1(b).												
(D' (T I	,											
(Print or Type I	(esponses)											
1 Name and A	ddress of Reporting 1	Person *	2 Isauan	Nomo	nd 1		Fradin	~	5. Relationship of	Reporting Per	son(s) to	
1. Name and Address of Reporting Person * 2. Issuer Nam BEZOS JEFFREY P Symbol				Iname a	ina i	licker or	radin	g	Issuer			
			AMAZO	ON CO	M I	INC LAN	//ZN]	1				
		61 1 11 \				-			(Chec	k all applicable	e)	
(Last)	(First) (N	(liddle)	3. Date of Earliest Transaction					V Director	X 109	Ø Owner		
P.O. BOX 8	1226		(Month/D) 08/18/20	-)				X Director X Officer (give		% Owner er (specify	
1.0. DOX 0	1220		00/10/20)1/					below)	below)		
									Chairman	, CEO and Pres	sident	
	(Street)		4. If Amer			e Original			6. Individual or Jo	oint/Group Filin	ng(Check	
			Filed(Mon	th/Day/Y	'ear)				Applicable Line)	On a Damant'n a D		
	WA 00100 1006								_X_ Form filed by 0 Form filed by N	Jore than One Re		
SEATTLE,	WA 98108-1226								Person			
(City)	(State)	(Zip)	Table	e I - Noi	n-De	rivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Date	e 2A. Dee	emed	3.		4. Securi				6. Ownership		
Security	(Month/Day/Year)		on Date, if							Form: Direct		
(Instr. 3)		any (Month)	'Day/Year)	Code (Instr.	8)	Disposed (Instr. 3,			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(iviolitii)	Day/Tear)	(msu.	0)	(11301. 5,	+ and	5)		(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s)			
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common												
Stock, par	08/18/2017			G(1)	V	105	D	\$0	79,896,533	D		
value \$.01				~		100	_	ΨŪ	.,.,.,.,			
per share												

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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	ress Relationships							
	Director	10% Owner	Officer	Other				
BEZOS JEFFREY P P.O. BOX 81226 SEATTLE, WA 98108-1226	Х	Х	Chairman, CEO and President					
<u>o</u> , ,								

Signatures

/s/ PAUL DAUBER, attorney-in-fact for Jeffrey P. Bezos, Chairman of the Board, Chief	08/21/2017				
Executive Officer and President					
**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) Contribution to non-profit organization.

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.