

Carberry Jeffrey  
Form 3  
August 02, 2017

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Carberry Jeffrey		(Month/Day/Year)	STAMPS.COM INC [STMP]	
(Last)	(First)	(Middle)	07/31/2017	
1990 E. GRAND AVE.			4. Relationship of Reporting Person(s) to Issuer	
(Street)			(Check all applicable)	
EL SEGUNDO,Â CAÂ 90245			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below)    (specify below) Chief Financial Officer	
(City)	(State)	(Zip)	5. If Amendment, Date Original Filed(Month/Day/Year)	
			6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	9,433	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

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				Shares		(I) (Instr. 5)	
Stock Option (Common Stock)	05/24/2012 <sup>(1)</sup>	05/24/2021	Common Stock	4,583	\$ 12.3	D	Â
Stock Option (Common Stock)	10/19/2014 <sup>(1)</sup>	09/19/2024	Common Stock	18,333	\$ 32.41	D	Â
Stock Option (Common Stock)	10/19/2015 <sup>(2)</sup>	09/19/2024	Common Stock	36,667	\$ 32.41	D	Â
Stock Option (Common Stock)	03/02/2015 <sup>(3)</sup>	02/02/2025	Common Stock	10,000	\$ 45.35	D	Â
Stock Option (Common Stock)	04/02/2015 <sup>(4)</sup>	03/02/2025	Common Stock	10,000	\$ 58.25	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Carberry Jeffrey 1990 E. GRAND AVE. EL SEGUNDO, CA 90245	Â	Â	Â Chief Financial Officer	Â

## Signatures

/s/ David M. Zlotchew, by power of attorney for Jeffrey Carberry

08/02/2017

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) This option had fully vested prior to the date of this Form 3.
- (2) This option had vested with respect to all but 3,056 shares prior to the date of this Form 3. The option will vest with respect to the remaining shares in two equal installments on August 19, 2017 and September 19, 2017.
- (3) This option vests in 36 approximately equal monthly installments from March 2, 2015 through February 2, 2018.
- (4) This option vests in 36 approximately equal monthly installments from April 2, 2015 through March 2, 2018.

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.