DELUXE CORP Form 4 January 26, 2017

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

January 31, Expires: 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Ad SCHRAM L		rting Person *	2. Issuer Name and Ticker or Trading Symbol DELUXE CORP [DLX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First)	(Middle) 3. Date of Earliest Transaction		(Check all applicable)		
3680 VICTORIA STREET NORTH			(Month/Day/Year) 01/24/2017	_X_ Director 10% Owner _X_ Officer (give title Other (specify below) Chief Executive Officer		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person		
SHOREVIEW, MN 55126				Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Aco	quired, Disposed of, or Beneficially Owned		

(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative	Secur	ities Acqu	iired, Disposed of	, or Beneficiall	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securit or(A) or Di (Instr. 3,	sposed	d of (D)	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	01/24/2017		A	18,004	A	<u>(1)</u>	296,162	D	
Comon Stock	01/24/2017		F	9,382	D	\$ 73.63	286,780 (2)	D	

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock Option	\$ 25.59					02/16/2012(3)	02/16/2018	Common Stock	54,200
Common Stock Option	\$ 25.45					02/16/2013(3)	02/16/2019	Common Stock	106,000
Common Stock Option	\$ 38.8					02/20/2014(3)	02/20/2020	Common Stock	95,800
Common Stock Option	\$ 50.32					02/27/2015(3)	02/27/2021	Common Stock	64,435
Common Stock Option	\$ 67.08					02/12/2016(3)	02/12/2022	Common Stock	64,162
Common Stock Option	\$ 54.3					02/17/2017(3)	02/17/2023	Common Stock	127,238

Reporting Owners

Schram

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SCHRAM LEE J 3680 VICTORIA STREET NORTH SHOREVIEW, MN 55126	X		Chief Executive Officer					
Signatures								
J. Michael Schroeder as Power of Att	Lee	01/26/2017						

**Signature of Reporting Person Date

Reporting Owners 2

01/26/2017

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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) This award reflects the settlement of performance share units that were determined to vest based on the level of achievement of the specified performance targets.
- (2) Total ownership includes 82,710 shares of restricted stock.
- Options vest in three equal installments on the three succeeding anniversary dates of the date of grant, provided the holder remains an employee of the Company. Date entered reflects date on which first installment vests(ed).

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.