Edgar Filing: Wayfair Inc. - Form 4

Wayfair Inc.										
Form 4										
September 3	0, 2015									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									APPROVAL	
		ITIES AND EXCHANGE COMMISSI hington, D.C. 20549			COMMISSION	OMB Number:	3235-0287			
Check th			8.,					Expires:	January 31,	
if no long subject to	NT OF CHAN	NGES IN BENEFICIAL OWN SECURITIES				NERSHIP OF	Estimated a	2005 d average		
Section	16.							burden hours per		
Form 4 c Form 5			$(\cdot) = f \cdot i$	C	D	···· 1· ··· ·	- A	response	0.5	
obligatio	n o *	ant to Section 1				•	e Act of 1934, 1935 or Section	•		
may con	unue.	30(h) of the In	•	•	· ·	•		1		
See Instr 1(b).	uction	50(ii) of the in	ivestinein	compan	ly 1 le	. 01 174	0			
- (-).										
(Print or Type]	Responses)									
1 37 1 1		*					5 5 1 1.			
1. Name and A Macri Edmo	er Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer						
	Jiid	Symbol Wovfoir	Vayfair Inc. [W] (Check all applicable)							
		•					(Check all applicable)			
(Last)	(First) (Mide	,	f Earliest T	ransaction			Director 10% Owner			
			(Month/Day/Year) 09/29/2015			X Officer (give title Other (specify				
PLACE, 7TH FL			1272013			below) below) SVP, Marketing and Analytics				
(Street) 4. If Ame			lf Amendment, Date Original ed(Month/Day/Year)							
						6. Individual or Joint/Group Filing(Check Applicable Line)				
			u(Monul/Day/Tear)				_X_ Form filed by One Reporting Person			
BOSTON, I	MA 02116						Form filed by M Person	lore than One Re	porting	
(City)	(State) (Zij	^{p)} Tabl	le I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date 2	A. Deemed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	• • • • • •		n Date, if Transaction(A) or Disposed of (D)			Securities	Form: Direct			
(Instr. 3) any (Month/Day/Year						Beneficially Owned	(D) or Ben Indirect (I) Own	Beneficial Ownership		
	,	Wondin Day Tear)	(111501.0)				Following	(Instr. 4)	(Instr. 4)	
					(A)		Reported			
					or		Transaction(s) (Instr. 3 and 4)			
Class A			Code V	Amount	(D)	Price	(
Class A Common	09/29/2015		S	500 <u>(1)</u>	D	\$	232,805	D		
Stock	09/29/2013		5	500 (1)	D	36.33	252,005	D		
Stoon										

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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	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			
Macri Edmond C/O WAYFAIR INC., 4 COPLEY PLACE, 7TH FL BOSTON, MA 02116			SVP, Marketing and Analytics				
Signatures							
/s/ Enrique Colbert, Attorney-in-fact for Edmond Macri	09/	30/2015					

Date

**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).

(1) The sales reported in this Form 4 were effected to a Rule 10b5-1 trading plan adopted by the reported person on November 19, 2014.

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.