## Edgar Filing: Support.com, Inc. - Form 4

Support.con Form 4											
November (	ЛЛ	CT A TEC	SECU			<b>TT A N</b>		OMMESION		PPROVAL	
	UNITED	SIAIES			AND EXC , D.C. 205		IGE CO	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or				SECU		Lanuary 31Expires:2005Estimated averageburden hours perresponse0.5					
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	(a) of the l	Public U	tility Hol		pany	Act of	Act of 1934, 1935 or Section )	I		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Cholawsky Elizabeth			2. issuer raune und riener or rraung					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (	Middle)	3. Date of Earliest Transaction (Chec						k all applicable)		
900 CHESAPEAKE DR, 2ND 10/ FLOOR 4. If								Director 10% Owner XOfficer (give title Other (specify below) below) President & CEO			
				endment, D nth/Day/Yea	ate Original r)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
REDWOO	D CITY, CA 940	63						Form filed by Me Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative S	ecurit	ies Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securitie our Disposed (Instr. 3, 4	d of (Ē	))	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	10/28/2016			Code V M	Amount 109,376	(D) A	Price \$ 0	(Inst. 3 and 4) 202,957	D		
Common Stock	10/28/2016			F <u>(1)</u>	41,103	D	\$ 0.821	161,854 <u>(2)</u>	D		

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. Transactic Code (Instr. 8)	orDerivative		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
Restricted Stock Unit	\$ 0	10/28/2016		М		109,376	(3)	(3)	Common Stock	109,376

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Cholawsky Elizabeth 900 CHESAPEAKE DR, 2ND FLOOR REDWOOD CITY, CA 94063			President & CEO				
Signatures							
/s/ Michelle Johnson, by power of attorney	1	1/01/2016					

<u>\*\*Signature of Reporting Person</u>

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) Shares of Common Stock were withheld by the Company to satisfy the reporting person's tax withholding obligation upon vesting of restricted stock units. The withheld shares were returned to treasury.
- (2) Reflect the number of shares of common stock owned as of October 28, 2016.
- Restricted Stock Units have been accelerated pursuant to a Separation Agreement and General Release, dated October 31, 2016, between(3) Support.com, Inc. and Elizabeth Cholawsky. Under the original terms of the award, 1/4th of the shares vested on each anniversary of the May 16, 2014 grant date.

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.