## Edgar Filing: Benefitfocus, Inc. - Form 4

Benefitfocus, Form 4	Inc.										
April 05, 2010	5										
FORM	Δ									PPROVAL	
	UNITE	D STATES		ITIES A hington,			NGE (	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Section 16.				NGES IN BENEFICIAL OWN SECURITIES				NERSHIP OF	Expires: Estimated a burden hou	•	
may contin	Form 4 orresponseForm 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Sectionsee Instruction30(h) of the Investment Company Act of 1940								•		
(Print or Type Ro	esponses)										
Restivo James P Syn			Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol Benefitfocus,Inc. [BNFT]				5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. D (Mo			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 04/01/2016				(Check all applicable) <u>X</u> Director 10% Owner X_ Officer (give title Other (specify below) Chief Technology Officer			
				mendment, Date Original Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
CHARLEST	ON, SC 2949	2						Form filed by M Person	More than One R	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executi any	emed on Date, if /Day/Year)	Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	l (A) o l 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	04/01/2016			A	9,490 (1)	A	\$ 0	9,490	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.

 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)	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)	;	ate	7. Title and A Underlying S (Instr. 3 and	Securities	8. De Se (I1
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Performance Restricted Stock Units	<u>(2)</u>					(2)	12/31/2017	Common Stock	8,627	

## **Reporting Owners**

Reporting Owner Name / Address			Relationships				
	Director	10% Owner	Officer	Other			
Restivo James P 100 BENEFITFOCUS WAY CHARLESTON, SC 29492			Chief Technology Officer				
Signatures							
/s/ Donald R. Reynolds, Attorney-in-Fact		04/05/	/2016				
**Signature of Reporting Person		Dat	e				

## **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) Represents restricted stock units which vest in four equal annual installments beginning on April 1, 2017, subject to continued employment.

Each performance restricted stock unit ("PRSU") represents a contingent right to receive one share of Issuer common stock. PRSUs vest upon the achievement of adjusted EBITDA and compounded annual revenue growth rate goals during the period of January 1, 2015

(2) through December 31, 2017. Vesting of the target level PRSUs will accelerate upon death or disability in an amount equal to the proportion of days in the performance period worked. Vesting of target PRSUs may also accelerate in certain circumstances if there is a change in control of the Issuer during the performance period.

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.