## Edgar Filing: EBAY INC - Form 4

ED AV INC

Form 4											
November 04	Л									PPROVAL	
		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287			
Check this if no longe subject to Section 16 Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Expires: Estimated a burden hou response	irs per	
Form 5 obligation: may contin <i>See</i> Instruct 1(b).	s Section $\hat{1}$	7(a) of the		ility Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectic 40	n		
(Print or Type Ro	esponses)										
DORMAN DAVID W Symbol			Symbol	suer Name <b>and</b> Ticker or Trading ol Y INC [EBAY]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)(First)(Middle)3. Date of (Month/Date)C/O KNOLL VENTURES, TOWER11/01/20PLACE 200, 3348 PEACHTREE				-			X_ Director 10% Owner Officer (give title Other (specify below) below)				
ROAD, NE	(Street)	ndment, Date Original th/Day/Year)				<ol> <li>6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person</li> </ol>					
ATLANTA,	GA 30326							Form filed by Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if Instr. 3) any		on Date, if	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			SecuritiesIBeneficially(OwnedI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
~				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	11/01/2014			А	239 <u>(1)</u>	А	\$0	3,334	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. Transactic Code (Instr. 8)	5. ofNumber 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 Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

DO C/C TO AT

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<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
RMAN DAVID W OKNOLL VENTURES WER PLACE 200, 3348 PEACHTREE ROAD, NE LANTA, GA 30326	Х					
gnatures						

David Wyatt Dorman 11/03/2014 <u>\*\*Signature of</u> Date 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).

The reporting person has received an exempt award of Deferred Stock Units ("DSUs") under the Company's 2008 Equity Incentive Award Plan, as amended from time to time. DSUs represent a right to receive shares of the Company's common stock upon termination of service as a Director of the Company. The reporting person has elected to receive DSUs in lieu of the annual retainer fees payable for

(1) service as a Director of the Company. The reporting person has elected to receive DSOs in neuror the annual relation rees payable for services on the Company's Board of Directors and any committees thereof. The DSUs are awarded on the date such fees would otherwise be payable (i.e., quarterly in arrears), and the number of DSUs granted represent the quotient of (A) such fees divided by (B) the Company's closing stock price on the date of grant rounded up to the nearest whole DSU. The DSUs are immediately vested.

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.