Edgar Filing: PITNEY BOWES INC /DE/ - Form 4

PITNEY BOWES Form 4 February 12, 2014												
Check this box if no longer subject to Section 16. Form 4 or	UNITED		Wa	ishington NGES IN	, D.C. 2	0549		COMMISSI NERSHIP (OMB A OMB Number: Expires: Estimated burden hou response	Janua average urs per	-0287
Form 5 obligations may continue. <i>See</i> Instruction 1(b). (Print or Type Respon	Section 17(a) of the P	Public U		lding Co	mpany A	Act o	ge Act of 193 f 1935 or Seo 40				
1. Name and Address TORSONE JOH	s of Reporting	_	Symbol	er Name an CY BOWE		-	BI]	5. Relationshi Issuer	-			
(Last) (ONE ELMCROP	. ,			of Earliest T Day/Year) 2014	Fransaction	1		Director X Officer below)	(give t		% Owner her (specify	7
			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 Form filed by More than One Reporting 					
STAMFORD, C		(T·)						Person	•			
(City) (State)	(Zip)	Tab	ole I - Non-	Derivativ	e Securitie	es Ac	quired, Dispose	ed of,	or Beneficia	lly Owne	ed
	insaction Date th/Day/Year)	2A. Deeme Execution I any (Month/Da)	Date, if	3. Transactic Code (Instr. 8) Code V	Dispose (Instr. 3,	d (A) or d of (D) 4 and 5) (A) or	S I I I I I I I I I I I I I I I I I I I	5. Amount of Securities Beneficially Dwned Following Reported Fransaction(s) Instr. 3 and 4)	Fo (D (I)	Ownership rm: Direct) or Indirect astr. 4)	7. Natur Indirect Benefici Ownersl (Instr. 4)	al 1ip
Reminder: Report on	a separate line	e for each cla	uss of sec	urities bene	ficially ov	vned direct	tly or	indirectly.				
rechnicer, report on	a separate fill				Pers infor requ	ons who mation c ired to re lays a cu	resp contai	ond to the co ined in this fo ad unless the ly valid OMB	orm a form	re not	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	3)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(1)</u>	02/10/2014		А		6,821		(3)	(3)	Common Stock	6,821
Performance Stock Units	<u>(2)</u>	02/10/2014		А		15,890		(4)	(4)	Common Stock	15,890

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
TORSONE JOHNNA G ONE ELMCROFT ROAD STAMFORD, CT 06926			EVP/Chief HR Officer					
Signatures								

Laurie Bellocchio - POA for Johnna	
Torsone	

**Signature of Reporting Person

Date

02/11/2014

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) Each restricted stock unit represents a contingent right to receive one share of Pitney Bowes common stock.
- (2) Each performance stock unit represents a contingent right to receive Pitney Bowes common stock based upon pre-determined performance factors.
- (3) Each unit represents a contingent right to receive one share of Pitney Bowes common stock that will vest in three (3) equal annual installments.

(4) The performance stock units (PSUs) represent a contingent right to receive Pitney Bowes common stock with a 3 year cliff vesting. The shares that will vest are based on the pre-established performance standards set by the Board upon making each award, and could result in more of less shares being issued at the time of the vesting due to the pre-established performance standards. Depending on financial performance, the resulting number of shares released can range from zero to a maximum of 200% of grant.

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.