Edgar Filing: Henricks Alan S. - Form 4

Form 4 May 30, 201									
FORM	ЛЛ								PPROVAL
	UNITED	STATES		RITIES A			COMMISSIO	N OMB Number:	3235-0287
Check th if no lon subject t Section Form 4 d	ger STATEN 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							January 31, 2005 average urs per . 0.5
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1(b).									
(Print or Type	Responses)								
1. Name and Address of Reporting Person <u>*</u> Henricks Alan S.			2. Issuer Name and Ticker or Trading Symbol ELLIE MAE INC [ELLI]			5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle)	3. Date of	of Earliest T	ransaction		(Cho	eck all applicabl	e)
C/O ELLIE HOPYARI	(Month/Day/Year) 05/29/2013				X_ Director 10% Owner Officer (give title Other (specify below) below)				
			(Month/Day/Year) Appli			Applicable Line)	Individual or Joint/Group Filing(Check plicable Line) _ Form filed by One Reporting Person		
PLEASANTON, CA 94588 Form filed by More than One Repo Person									
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or 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)
Reminder: Rep	port on a separate line	e for each cla	ass of sec	urities benet	ficially ow	ned directly of	or indirectly.		
					inform	nation cont	spond to the colle ained in this forn	n are not	SEC 1474 (9-02)

Persons who respond to the collection of SEC 147 information contained in this form are not (9-0) 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)

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

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5)	f			
				Code V	(A) (D) Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Non-Qualified Stock Option (right to buy)	\$ 22.2	05/29/2013		А	12,000	<u>(1)</u>	05/29/2023	Common Stock	12,0

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Henricks Alan S. C/O ELLIE MAE, INC. 4155 HOPYARD ROAD, SUITE 200 PLEASANTON, CA 94588	Х					
Signatures						

/s/ Alan S. Henricks	05/29/2013		
**Signature of	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).
- (1) Option vests with respect to 1/12th of the shares on each monthly anniversary of the date of grant of option, such that the option will be fully vested and exercisable on May 29, 2014.
- (2) The reported transaction is a grant of a derivative security, in which we have left column 8 blank, and have reported the exercise or conversion price of the derivative security in column 2.

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.