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Check this box if no longer subject to SECURITIES Section 16. SECURITIES								3235-0287 January 31, 2005 average rs per			
(Print or Type I	Responses)										
TOMASELLO ROBIN Symbol			ol	er Name and Ticker or Trading GG, INC [CHGG]				5. Relationship of Reporting Person(s) to Issuer			
(Month/I			Pate of Earliest Transaction onth/Day/Year) 23/2016				(Check all applicable) <u></u> Director 10% Owner <u></u> Officer (give title Other (specify below) VP, CORPORATE CONTROLLER				
				endment, Date Original onth/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 Person 			
(City)	(State)	(Zip) T	able I - Non-J	Derivative	Securi	ties Acq	uired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common			Code V	⁷ Amount 12,897	(D)	Price	(Instr. 3 and 4)				
Stock	02/23/2016		А	<u>(1)</u>	А	\$0	58,931	D			
Common Stock	02/23/2016		F <u>(2)</u>	1,884	D	\$ 3.47	57,047	D			
Common Stock	02/23/2016		А	54,166 (3)	А	\$0	111,213	D			
Common Stock	02/24/2016		F <u>(2)</u>	2,171	D	\$ 4.12	109,042	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)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer			le and	8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transactio Code (Instr. 8)	of Derivative Securities Acquired	(Month/Day/Year) rivative curities quired		Secur	rlying	Derivative Security (Instr. 5)	Deriv Secur Bene Owne Follo Bana
					 (A) or Disposed of (D) (Instr. 3, 4, and 5) 						Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
TOMASELLO ROBIN C/O CHEGG, INC 3990 FREEDOM CIR SANTA CLARA, CA 95054			VP, CORPORATE CONTROLLER			
Signatures						
/s/ Robin Tomasello by Dave E Attorney-in-Fact	Borders,		02/25/2016			

**Signature of Reporting Person

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) Represents the number of shares subject to PSUs awarded to the reporting person in 2015; one-third of the shares vested on February 23, 2016 with the remaining to vest in equal annual installments over the next 2 years.

Exempt transaction pursuant to Section 16b-3(e) - payment of exercise price or tax liability by delivering or withholding securities incident to the receipt, exercise or vesting of a security issued in accordance with Rule 16b-3. All of the shares reported as disposed of in

- (2) this Form 4 were relinquished by the Reporting Person and cancelled by the Issuer in exchange for the Issuer's agreement to pay federal and state tax withholding obligations of the Reporting Person resulting from the vesting of RSUs. The Reporting Person did not sell or otherwise dispose of any of the shares reported on this Form 4 for any reason other than to cover required taxes.
- (3) Represents an award of restricted stock units ("RSU", and each a "RSU"). Each RSU represents a contingent right to receive one share of common stock of the Issuer upon vesting.

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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.