Edgar Filing: Benefitfocus, Inc. - Form 4

Benefitfocus Inc

Form 4	·										
August 08, 2									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 o	ger STATEN 6.	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31, 2005 verage rs 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											
(Print or Type I	Responses)										
LAMONT ANN H Symbol Issuer Benefitfocus.Inc. [BNFT]					Issuer	f Reporting Person(s) to ck all applicable)					
				Earliest Tra ay/Year))16	ansaction			X_ Director 10% Owner Officer (give title Other (specify below) below)			
	Filed(Month/Day/Year) Applicable						Applicable Line) Form filed by O	y One Reporting Person			
NORWAL	K, CT 06851							_X_ Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Se	curiti	es Acqu	uired, Disposed of	, or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		Code	4. Securitie n(A) or Disp (Instr. 3, 4) Amount	osed o	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)	Indirect Beneficial	
Common Stock	08/05/2016			J <u>(1)</u>	976,500	D	<u>(1)</u>	630,378	I <u>(2)</u>	See Note (2)	

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	Amou Unde Secur	tle and unt of vrlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
Repo	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

	Director	10% Owner	Officer	Other		
LAMONT ANN H C/O OAK INVESTMENT PARTNERS 901 MAIN AVENUE, SUITE 600 NORWALK, CT 06851	Х					
OAK INVESTMENT PARTNERS XII L 901 MAIN AVENUE SUITE 600 NORWALK, CT 06851	Р			Less then 10% Ownership		
Signatures						
/s/ Ann H. Lamont					08/08/2016	
<u>**</u> Signatu		Date				
/s/ Ann H. Lamont, Managing Member of Oak Associates XII, LLC, general partner of Oak Investment Partners XII, Limited Partnership						
<u>**</u> Signatu	re of Reporting P	erson			Date	
/s/ Ann H. Lamont, Managing Member of Oak Associates XII, LLC						
<u>**</u> Signatu	re of Reporting P	erson			Date	

Explanation of Responses:

Reporting Owner Name / Address

* 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) On August 5, 2016, Oak Investment Partners XII, L.P., a Delaware limited partnership, ("Oak XII") made an in-kind distribution, without any additional consideration, of common stock of the Issuer to the limited partners of Oak XII.
- (2) Represents shares directly owned by Oak XII. Oak Associates XII, LLC, a Delaware limited liability company ("Oak Associates") and the General Partner of Oak XII, may be deemed to beneficially own these shares.

Remarks:

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This Form 4 report is being filed by Ms. Lamont, Oak XII, and Oak Associates (together the "Reporting Persons"). Ms. Lamon 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.