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Form 4										
March 03, 2								OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OMB Number:	3235-0287	
if no lo subject Section Form 4 Form 5 obligati may co	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Estimated burden hou response	Estimated average burden hours per response 0.5	
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> Bradley Julie MB			2. Issuer Name and Ticker or Trading Symbol TripAdvisor, Inc. [TRIP]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) C/O TRIPADVISOR, INC., 141 NEEDHAM STREET			3. Date of Earliest Transaction (Month/Day/Year) 02/27/2015			Director 10% Owner X Officer (give title Other (specify below) below) SVP, CFO, Treasurer				
(Street) NEWTON, MA 02464			Filed(Month/Day/Year) A			Applicable Line) _X_ Form filed by Form filed by	 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)	Tał	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of. or Beneficia	llv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D:	ed Date, if	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, Amount	ies (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	
Reminder: Re	eport on a separate line	e for each cl	ass of sec	urities bene	Perso inforr requi	ons who res nation con red to resp ays a curre	or indirectly. spond to the colle tained in this form ond unless the fo ntly valid OMB co	i are not rm	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
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securitie
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)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Restricted Stock Units	\$ 0	02/27/2015		А	11,684	02/15/2016(1)	02/15/2020	Common Stock	11,6
Stock Option (Right to Buy)	\$ 89.86	02/27/2015		A	29,664	02/15/2016 <u>(2)</u>	02/26/2025	Common Stock	29,6

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting o wher runte / runtess	Director	10% Owner	Officer	Other			
Bradley Julie MB C/O TRIPADVISOR, INC. 141 NEEDHAM STREET NEWTON, MA 02464			SVP, CFO, Treasurer				
Signatures							
/s/ Linda C. Frazier, attorney in fact		03/03/2015					

Date

**Signature of 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) Date at which first vesting occurs is indicated. One-fourth of the total number of restricted stock units ("RSUs") vest on the first vesting date and an additional one-fourth each anniversary thereafter until the RSUs are fully vested.
- (2) Date at which first vesting occurs is indicated. One-fourth of the total number of options vests on the first vesting date and an additional one-fourth each anniversary thereafter until the options are fully 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.