Edgar Filing: NUTRI SYSTEM INC /DE/ - Form 4

	STEM INC /DE/										
Form 4	016										
August 17, 2	_									PROVAL	
FORM	14 UNITED	STATES					NGE CO	OMMISSION	OMB OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 c Form 5 obligatio may cont <i>See</i> Instr 1(b).	ger 5 16. 5 5 5 5 5 5 5 5 5 5 5 5 5	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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						Expires:January 31, 2005Estimated average burden hours per response0.5			
(Print or Type]	Responses)										
Krausz Keira Symbo NUT (Last) (First) (Middle) 3. Data (Mont 600 OFFICE CENTER DRIVE 08/15 (Street) 4. If A			Symbol	r Name and]	5. Relationship of Reporting Person(s) to Issuer			
			NUTRI SYSTEM INC /DE/ [NTRI]				NIKIJ	(Check all applicable)			
			(Month/I	If Amendment, Date Original				Director 10% Owner Officer (give title Other (specify below) Chief Marketing Officer 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
FORT WAS	SHINGTON, PA	19034					ī	Form filed by Mo Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficiall	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	Code (Instr. 8)	4. Securit onor Dispos (Instr. 3, 4 Amount	ed of (D) 5) Price	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)	
Common stock	08/15/2016			S <u>(1)</u>	20,603	D	\$ 29.954 (2)	51,759	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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. or/Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addres	s	Relationships						
	Director	10% Owner	Officer	Other				
Krausz Keira 600 OFFICE CENTER DRIVE FORT WASHINGTON, PA 19			Chief Marketing Officer					
Signatures								
/s/ Michael P. 08 Monahan 08	8/17/2016							

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Sale pursuant to a 10(b)5-1 plan.

**Signature of Reporting

Person

The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$29.61 to \$30.30, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and

(2) Inclusive: The reporting person undertakes to provide to the issuer, any security holder of the issuer, of the start of the securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

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.