Edgar Filing: EPAM Systems, Inc. - Form 4

EPAM Syste	ms, Inc.											
Form 4												
June 09, 201	6											
FORM 4 UNITED STATES SECURITIES AND EXCHAN							COMMERION	OMB APPROVAL				
		LD STATE		hington,			NGE	COMMISSION	OMB Number:	3235-0287		
Check thi	is box		vv as	iiiigtoii,	D.C. 20.) 7				January 31,		
if no long		EMENT O	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF	Expires:	2005		
	Section 16. STATEMENT OF CHARGES IN BEINE									Estimated average burden hours per		
Form 4 or	r								response	•		
Form 5 obligatior	• 0	*					•	ge Act of 1934,				
may conti				•	•	- ·		of 1935 or Sectio	n			
See Instru	iction	30(h) of the Inv	vestment	Company	y Act	of 19	40				
1(b).												
(Print or Type R	Responses)											
Kuerpick Peter Symbol				Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
								Issuel				
				Systems, Inc. [EPAM]				(Check all applicable)				
(Last)	(First)	(Middle)		3. Date of Earliest Transaction								
C/O EPAM SYSTEMS, INC., 41 (Month/D) 06/07/20				-			X_ Director Officer (give		6 Owner er (specify			
	ΓY DRIVE, S		00/07/20	/10				below)	below)			
(Street) 4. If Amer			1 If Amer	andment. Date Original				6. Individual or Joint/Group Filing(Check				
			Amendment, Date Original Month/Day/Year)				Applicable Line)					
			(_X_ Form filed by				
NEWTOWN	N, PA 18940							Form filed by M Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	I Nee D	.	· · · · · ·	4		f an Danafiaia	ller Oermand		
		-					ues Ac	quired, Disposed o		-		
1.Title of Security	2. Transaction (Month/Day/Y		emed ion Date, if	3. 4. Securities TransactionAcquired (A) or			or	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		
(Instr. 3)	(inonial/Day) I	any	Code Disposed of (D)			Beneficially	(D) or Indirect (I)	Beneficial				
		(Month	Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			Owned		Ownership				
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A) or		Transaction(s)				
				Code V	Amount		Price	(Instr. 3 and 4)				
EPAM												
Common	06/07/2016			А	985	А	\$0	4,646	D			
Stock (1)												

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)

Reporting Owners

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired			·			Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(
					4, and 5)						
					i, una 5)						
									Amount		
						Date	Expiration		or		
							•	Title	Number		
						Exercisable	Date	of	of		
				Code V	(A) (D)				Shares		

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Kuerpick Peter C/O EPAM SYSTEMS, INC. 41 UNIVERSITY DRIVE, SUITE 202 NEWTOWN, PA 18940	X						
Signatures							
/s/ Ginger Mosier, as Attorney-in-Fact	06/09/2	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).
- Represents shares of restricted stock granted on June 7, 2016 pursuant to the EPAM Systems, Inc. Non-Employee Director Compensation (1) Policy. These shares will vest 100% on June 7, 2017.

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.