## Edgar Filing: SHUTTERFLY INC - Form 4

SHUTTERF	FLY INC											
Form 4	7											
May 21, 200										OMB A	PPROVA	J
FORM	<b>4</b> UNITED	STATES					NGE	COMMISSIC	0	MB lumber:	3235-	
Check th if no lon subject t Section Form 4 of Form 5 obligation may con See Instr	ger o 16. or Filed pur ons tinue.	<b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</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								Expires: January 3 200 Estimated average burden hours per response 0		ry 31, 2005 0.5
1(b). (Print or Type	Responses)											
× 51	1											
1. Name and A WHITE JA	Person <u>*</u>	<ul> <li>2. Issuer Name and Ticker or Trading</li> <li>Symbol</li> </ul>					5. Relationship of Reporting Person(s) to Issuer					
			SHUTTERFLY INC [SFLY]					(Check all applicable)				
(Last)	(First) (	Middle)	3. Date of Earliest Transaction (Month/Day/Year)					X_ Director 10% Owner				
			05/17/2007					Officer (give title Other (specify below) below)				
			Amendment, Date Original Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person						
PALO ALT	CO, CA 94304100	)5						Form filed b Person	y More	than One Ro	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securit	ties A	cquired, Disposed	l of, or	Beneficia	lly Owned	d
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	4. Securit onAcquired Disposed (Instr. 3, 4)	(A) or of (D) 4 and 5) (A) or	Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form	wnership n: Direct or Indirect r. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	ıl
Reminder: Rep	port on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned dire	ectly o	r indirectly.				
								pond to the coll ained in this for			EC 1474 (9-02)	

Persons who respond to the collection of SEC 14 information contained in this form are not (9-0 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	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount o
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities
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	Amount or Number of Share
Stock Option (Right to Buy)	\$ 17.75	05/17/2007		А		10,000		06/17/2007 <u>(1)</u>	05/16/2017	Common Stock	10,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
WHITE JAMES N 755 PAGE MILL ROAD, SUITE A-200 PALO ALTO, CA 943041005	Х							
Signatures								
By: Robert Yin, by power of attorney	05/21/20	007						
**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) Commencing 6/17/07, the option vests monthly as to 1/36th of the total number of shares subject to the grant.
- (2) The reporting person shares pecuniary interest in these shares with other individuals pursuant to a contractual relationship. The reporting person disclaims beneficial ownership in these shares except as to the reporting person's pecuniary interest in these shares.

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.