Edgar Filing: FireEye, Inc. - Form 4

FireEye, Inc Form 4 May 05, 201												
										PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check th									Expires:	January 31,		
if no longer subject to Section 16. Section 16.				NGES IN BENEFICIAL OWNERSH SECURITIES				NERSHIP OF	Estimated a burden hou	•		
Form 4 o	or								response 0.5			
Form 5	Filed put	rsuant to S	ection 16	6(a) of the	e Securiti	es Ex	chang	e Act of 1934,				
obligatio may cont				•	•			f 1935 or Sectio	n			
See Instr		30(h) o	of the Inv	vestment	Company	/ Act	of 194	40				
1(b).												
(Print or Type I	Responses)											
	Address of Reporting			Name and	Ticker or T	Trading	g	5. Relationship of Issuer	f Reporting Person(s) to			
BERRY MI	CHAEL J		Symbol	mbol				issuel				
Fi				FireEye, Inc. [FEYE]				(Check all applicable)				
(Last)	(First) (Middle)	3. Date of	Earliest Tra	ansaction			(encer un applicable)				
			(Month/Da	Month/Day/Year)				Director	10%	Owner		
				05/05/2016				X Officer (give title Other (specify below) below)				
MCCARTHY BLVD.								EVP & Chief Financial Officer				
	(S ture et)		4 10 4	1								
				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check				
								Applicable Line) _X_ Form filed by One Reporting Person				
MILDITAS	CA 05025								ore than One Reporting			
MILPITAS,	, CA 95035							Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acc	quired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Dat			3.				5. Amount of	6. Ownership			
Security	(Month/Day/Year)		n Date, if		on(A) or Dis	sposed	l of		Form: Direct			
(Instr. 3)		any (Month/F	Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
	Day(Tear) (Insu. 6) (Insu. 5, 4 and 5))	Following	(Instr. 4)	(Instr. 4)				
						(Λ)		Reported				
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	05/05/2016			٨	50,000		¢ 0	200 644	D			
Stock	05/05/2016			А	(1)	А	\$0	209,644	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)

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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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BERRY MICHAEL J C/O FIREEYE, INC. 1440 MCCARTHY BLVD. MILPITAS, CA 95035			EVP & Chief Financial Officer					
Signatures								
Louise Carbone, Attorney-in-Fact	0	5/05/2016						
**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).
- (1) Represents shares underlying restricted stock units ("RSUs"). One-fourth (1/4) of the RSUs will vest on each of the first four (4) anniversaries of May 15, 2016, in each case subject to the Reporting Person's continued service through the applicable vesting date.

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.