## Edgar Filing: Angie's List, Inc. - Form 4

Form 4											
January 17,										PROVAL	
FORM	<b>14</b> UNIT	TED STATE		RITIES A			NGE CO	OMMISSION	OMB OMB Number:	3235-0287	
Check the		8.	,				Expires:	January 31,			
if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to S				SECUI	RITIES				Estimated a burden hour response		
obligatic may con <i>See</i> Instr 1(b).	tinue. Section	17(a) of the	Public U		lding Cor	npan	y Act of	1935 or Section	L		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Oesterle William Seelye			Symbol	Symbol				5. Relationship of Reporting Person(s) to Issuer			
			U	s List, Inc				(Check all applicable)			
(Last) (First) (Middle) 1030 EAST WASHINGTON ST			(Month/	3. Date of Earliest Transaction (Month/Day/Year) 01/15/2014				X Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer			
		Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
INDIANAI	POLIS, IN 46	5202					i	Form filed by Me Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	y Owned	
1. Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Dat any (Month/Day/Year)		n Date, if	Date, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	01/15/2014			Code V S(1)	Amount 12,800	(D)	Price \$ 14.7388	(Instr. 3 and 4) 2,534,925	D		
Common Stock	01/16/2014			S <u>(1)</u>	12,800	D	(2) \$ 15.0725 (3)	2,522,125	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	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		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Oesterle William Seelye 1030 EAST WASHINGTON ST INDIANAPOLIS, IN 46202	Х		Chief Executive Officer				
Signatures							
/s/ Shannon M. Shaw as							

/s/ Shannon M. Shaw, as Attorney-in-fact

01/17/2014 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) Shares disposed of pursuant to a previously established Rule 10b5-1 Plan.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$14.37 to \$15.14, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer or the staff of the

(2) to \$15.14, inclusive: The reporting person undertakes to provide to the issuer, any security holder of the issuer of the issu

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$14.79 to \$15.52, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer or the staff of the

(3) To \$15.52, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer of the scale of t

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.