Edgar Filing: PETMED EXPRESS INC - Form 4

PETMED EX	XPRESS INC									
Form 4										
March 26, 20)15									
FORM	ΙΔ								OMB AF	PROVAL
	UNITED	STATES		ITIES A hington,			NGE C	OMMISSION	OMB Number:	3235-0287
Check thi if no long	or								Expires:	January 31,
subject to		MENT OF	CHAN			ICIA	LOW	NERSHIP OF	Estimated a	2005 verage
Section 1	6.			SECUR	ITIES				burden hour	rs per
Form 4 or Form 5					a i				response	0.5
obligation	• • • • •						-	e Act of 1934,		
may conti	inue. Section 17(•	•	· ·		1935 or Section	1	
See Instru	iction	50(II) (of the m	vestment	Compan	y Ac	t 01 194	0		
1(b).										
(Print or Type R	Responses)									
	ddress of Reporting	Person [*]	2. Issuer	Name and	Ticker or	Tradir	ng	5. Relationship of	Reporting Pers	on(s) to
KORN RON	JALD J		Symbol					Issuer		
			PETME	D EXPRI	ESS INC	: [PE'	TS]	(Check	c all applicable)
(Last)	(First) (Middle)	3. Date of	Earliest Tra	ansaction			(Check	an applicable)
			(Month/D	ay/Year)				X Director		Owner
1441 SW 29	TH AVENUE		03/25/20	015				Officer (give t below)	itle Othe below)	er (specify
	(Street)	·	4. If Ame	ndment, Da	te Origina	l		6. Individual or Joi	int/Group Filin	g(Check
			Filed(Mon	th/Day/Year)			Applicable Line)		
DOMBANIO		0.00						_X_ Form filed by O Form filed by M		
POMPANO	BEACH, FL 33	069						Person		1 0
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of,	or Beneficial	ly Owned
1.Title of	2. Transaction Date			3.	4. Securi				6. Ownership	
Security	(Month/Day/Year)		Date, if	Transactio		-			Form: Direct	Indirect Beneficial
(Instr. 3)		any (Month/Da	av/Year)	Code (Instr. 8)	(Instr. 3,	4 and	3)	•	(D) or Indirect (I)	Ownership
		(()				Following	(Instr. 4)	(Instr. 4)
						(A)		Reported		
						or		Transaction(s) (Instr. 3 and 4)		
0				Code V		(D)	Price	(instree und T)		
Common	03/25/2015			S	2,000 (1)	D	\$	72,333	D	
Stock					(1)		16.25			

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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	of De Se Ac (A Di of (Ir	ımber	(Month/Day ve es d	Date	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code Y	V (A	.) (D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Add	ress	Relationsh		
	Director	10% Owner	Officer	Other
KORN RONALD J 1441 SW 29TH AVENUE POMPANO BEACH, FL 33	X 3069			
Signatures				
/s/ Ronald J. Korn	03/26/2015			
<u>**</u> 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) The reported transactions are pursuant to a pre-arranged structured sales plan that is in accordance with both the Securities and Exchange Commission's Rule 10b5-1 and the PetMed Express, Inc. insider trading policy.

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.