## Edgar Filing: HP INC - Form 4

HP INC

Form 4	6										
April 21, 2016								OMB A	OMB APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or	NGES IN I SECUR		CIA	LOW	NERSHIP OF	burden hou	Expires:January 31 200Estimated average burden hours per response0.				
Form 5 obligation may conti <i>See</i> Instru- 1(b).	s Section 17(a)	uant to Section ) of the Public U 30(h) of the I	Jtility Hold	ling Com	pany	Act o	of 1935 or Section				
(Print or Type R	esponses)										
1. Name and Address of Reporting Person * GUPTA RAJIV2. Issuer Symbol			er Name <b>and</b>	Ticker or 7	Гradin	ıg	5. Relationship of Reporting Person(s) to Issuer				
	C [HPQ]				(Check all applicable)						
(Last)(First)(Middle)3. Date of (Month/DC/O HP, 1501 PAGE MILL ROAD04/20/20			-				Director Officer (give below)		6 Owner er (specify		
	endment, Dat onth/Day/Year)	•			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>						
PALO ALTO	D, CA 94304						Form filed by M Person	More than One Ro	eporting		
(City)	(State) (Z	Zip) Tal	ole I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code	TransactionAcquired (A) or Code Disposed of (D)			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	04/20/2016		Code V M	Amount 5,850	or (D) A	Price \$ 0	(Instr. 3 and 4)	D			
SIUCK											

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	04/20/2016		М	5	5,850 (2)	(2)	(2)	Common Stock	5,850	9

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationsh	ips					
	Director	10% Owner Officer		Other				
GUPTA RAJIV C/O HP 1501 PAGE MILL ROAD PALO ALTO, CA 94304								
Signatures								
/s/ Katie Colendich as Attorney Gupta		04/21/2016						
<u>**</u> Signature of Reporting	ng Person			Date				
Explanation of Dechanges								

## 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) Each restricted stock unit represents a contingent right to receive one share of HP common stock.

As previously reported, on 04/20/15 the reporting person was granted 5,662 restricted stock units ("RSUs"), all of which cliff vested on 04/20/16. Dividend equivalent rights accrue with respect to these RSUs when and as dividends are paid on HP common stock. The

(2) number of derivative securities beneficially owned immediately prior to the transaction being reported includes 188 dividend equivalent rights. These RSUs cliff vested on 04/20/16, at which time the vested shares were delivered to the reporting person. The number of derivative securities in column 5 includes 188 vested dividend equivalent rights.

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.