Edgar Filing: FLEETCOR TECHNOLOGIES INC - Form 4

FLEETCOR Form 4	TECHNOLOC	SIES INC									
August 09, 2	2016										
FORM	ЛЛ									PROVAL	
	UNITE	D STATES		RITIES A shington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check th if no long								Expires:	January 31, 2005		
subject to Section 1	5 SIAIE	LMENT O	F OF CHANGES IN BENEFICIAL OWNERSHIF SECURITIES						Estimated a	iverage	
Form 4 o		SECONTIES						rs per 0.5			
Form 5 obligatio	no *						•	e Act of 1934,	response		
may cont	tinue. Section 1			tility Hold vestment	•	· ·	•	f 1935 or Section	n		
See Instruction 1(b).	uction	50(II)) of the m	vestment	compan	ly ne		10			
	.										
(Print or Type I	Responses)										
				ssuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
-			-	Symbol FLEETCOR TECHNOLOGIES INC [FLT]							
(Last)	(First)					D'	Director 10% Owner X Officer (give title Other (specify				
. , ,	(1150)	(winduic)			ansaction						
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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.

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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)	Transaction of Derivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Options (1)	\$ 87.61	08/08/2016		М		5,000	07/01/2016	07/25/2023	Common Stock	5,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Reed John A 5445 TRIANGLE PARKWAY SUITE 400 NORCROSS, GA 30092			Global Chief Information Offic				
Signatures							
/s/ Sean Bowen, under power of attorney		08/09/20)16				
** 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) Pursuant to 10b5-1 sales plan

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.