### SPS COMMERCE INC

Form 5

February 09, 2016

#### **OMB APPROVAL** FORM 5

Check this no longer sto Section Form 4 or 5 obligatio may contin See Instruct 1(b). Form 3 Ho Reported Form 4 Transaction Reported	box if subject 16. Form ns nue. ction Filed pursu pldings Section 17(a)	JAL STATEME OWNER  Lant to Section 16	NT OF CH SHIP OF S 5(a) of the S ility Holding	ANGES ECURI Eccurities g Compa	IN I FIES Excl ny A	SENE nange of 1	FICIAL Act of 1934, 1935 or Sectio	Number: Expires: Estimated a burden hou response	rs per	
1. Name and A Ramsey Jam	ddress of Reporting Pones Burr	Symbol	2. Issuer Name and Ticker or Trading Symbol SPS COMMERCE INC [SPSC]				5. Relationship of Reporting Person(s) to Issuer			
(Last) 333 SOUTH		(Month/D	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2015				(Check all applicable)  _X_ Director 10% Owner Officer (give title below) Other (specify below)			
STREET,Â	SUITE 1000 (Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Reporting  (check applicable line)				
MINNEAPO	DLIS, MN 554	02				-	_X_ Form Filed by Form Filed by I Person			
(City)	(State) (Z	Zip) Table	e I - Non-Deri	vative Sec	urities	s Acqu	ired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit Acquired Disposed (Instr. 3,	(A) o of (D 4 and (A) or	)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	05/14/2015	<b>^</b>	* 4	co (1)		Φ.Ω	1.577	D	<b>?</b>	

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

05/14/2015

Stock

Â

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.

\$ 0 1,577

D

SEC 2270 (9-02)

Â

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

685 (1) A

A4

### Edgar Filing: SPS COMMERCE INC - Form 5

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. Transaction Code (Instr. 8)	Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 67.37	05/14/2015	Â	A4	2,253	Â	(2)	05/13/2022	Common Stock	2,253

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Ramsey James Burr						
333 SOUTH SEVENTH STREET SUITE 1000	ÂΧ	Â	Â	Â		
MINNEAPOLIS, MN 55402						

# **Signatures**

/s/ Jonathan R. Zimmerman, Attorney-in-Fact for James B.
Ramsey
02/09/2016

\*\*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) This reflects a restricted stock award. The shares subject to this award will vest in four equal installments on the last day of each fiscal quarter with the first vesting occurring on June 30, 2015, provided the recipient remains a member of the board as of the vesting date.
- Shares subject to this Option vest in four equal installments on the last day of each fiscal quarter with the first vesting occurring on June 30, 2015, provided the reporting person remains a member of the board as of the vesting date.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

Reporting Owners 2