### Edgar Filing: JOHNSON JONATHAN E III - Form 4

JOHNSON . Form 4 February 05	JONATHAN E III , 2019									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL		
	UNITED STA		ashington,			INGE C	01411411351014	OMB Number:	3235-0287	
Check th		x						Expires:	January 31,	
if no long subject to Section 1 Form 4 c	$\frac{\mathbf{SIATEMEN}}{16.}$	STATEMENT OF CHANGES IN BENEFIC SECURITIES					ERSHIP OF	Estimated a burden hour response	-	
obligatio may con	Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,See InstructionSection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type ]	Responses)									
JOHNSON JONATHAN E III Symbol			ssuer Name <b>and</b> Ticker or Trading ool ERSTOCK.COM, INC [OSTK]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle			,	0 [ 0		(Check	k all applicable	)	
			te of Earliest Transaction th/Day/Year) 2/2019				X Director 10% Owner X Officer (give title Other (specify below) below) President, Medici			
(Street) 4. If Ame				ate Origina	ıl		6. Individual or Joint/Group Filing(Check			
MIDVALE	, UT 84047	Filed(M	onth/Day/Year	.)			Applicable Line) _X_ Form filed by O Form filed by M Person			
(City)	(State) (Zip)	Tal	ole I - Non-I	Derivative	Secu	rities Acqu	iired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. (Month/Day/Year) Exe any (Mo	cution Date, if		4. Securi on(A) or Di (Instr. 3,	ispose	d of (D)	5. Amount of 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)	
~			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	02/02/2019		М	3,333	А	\$ 0.0001	41,117	D		
Common Stock	02/02/2019		F	1,155	D	\$ 17.55	39,962	D		
Common Stock							1,688.3	I	Based on 2/1/2019 401k Plan balance provided by Fidelity	

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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.

# 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. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	02/02/2019		М	3,333	<u>(1)</u>	<u>(1)</u>	Common Stock	3,333	\$

## **Reporting Owners**

\*\*Signature of Reporting Person

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
JOHNSON JONATHAN E III 799 W COLISEUM WAY MIDVALE, UT 84047	Х	President, Medici					
Signatures							
/s/ Allison Fletcher (attorney-in-fact)		02/05/2019					

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).

Each restricted stock unit represents a contingent right to receive one share of Overstock.com, Inc. common stock. The restricted stock units vest or have vested in three equal installments at the close of business on February 2, 2018, February 2, 2019, and February 2, 2020.

(1) Vested shares are delivered to the reporting person promptly after the restricted stock units vest. Amount shown does not include previously granted RSUs with different vesting schedules.

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.