Edgar Filing: Spitz David J - Form 4

| Spitz David J Form 4 March 07, 20 | | | | | | | | | | | |
|--|---|--|--|---|---------------------------|------------------------------|-------------|---|--|--|--|
| FORM A | | | | | | | | OMB APPROVAL | | | |
| | UNITEDS | Washington, D.C. 20549 | | | | | | | | 3235-0287 | |
| Check this if no longe subject to Section 16 Form 4 or Form 5 obligation | Filed purs | | | | | | | | | Expires: January 31 2005 Estimated average burden hours per response 0.5 | |
| may contin See Instruct 1(b). | nue. Section 17(a | | | • | t Compai | · · | | | n | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| Spitz David J Signature Si | | | 2. Issuer Name and Ticker or Trading Symbol CHANNELADVISOR CORP [ECOM] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) C/O CHANN CORPORAT CARRINGT BOULEVAF | NELADVISOR TION, 3025 ON MILL | liddle) | 3. Date of (Month/D 03/06/20 | ay/Year) | ransaction | | | X Director X Officer (give below) Pres | | Owner er (specify | |
| | | | | endment, Date Original nth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MORRISVII | LLE, NC 27560 | | | | | | | | Iore than One Re | | |
| (City) | (State) (| Zip) | Tabl | e I - Non- | Derivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deen Execution any (Month/E | n Date, if | Code (Instr. 8) | ion(A) or D (Instr. 3, | ispose 4 and (A) or | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 03/06/2019 | | | F <u>(1)</u> | 5,302 | D | \$ 12.69 | 526,526 | D | | |

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

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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) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and unt of rlying tities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|-----------------------|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|--|----------|---------------|-----------|----------------------|-------|--|--|--|
| | | Director | 10% Owner | Officer | Other | | | |
| Spitz David J C/O CHANNELADVISOR CORPORA 3025 CARRINGTON MILL BOULEVA MORRISVILLE, NC 27560 | | Х | | President and CEO | | | | |
| Signatures | | | | | | | | |
| /s/ Diana S. Allen, Attorney-in-fact | 03/07/20 | 19 | | | | | | |
| **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 transaction reported represents the withholding of shares by the issuer to satisfy the reporting person's tax withholding obligations in connection with the non-reportable vesting and settlement of restricted stock units.

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.