Edgar Filing: AKAMAI TECHNOLOGIES INC - Form 5

AKAMAI TECHNOLOGIES INC Form 5 January 0 FOR

Form 5											
January 06,	2017										
FORM	15						OMB AF	PROVAL			
	UNITEI) STATES			D EXCHANGE C	OMMISSION	OMB Number:	3235-0362			
Check thi no longer	subject		Wa	shington, D		Expires:	January 31, 2005				
to Sectior Form 4 or	A NT	NUAL ST	HANGES IN BEN SECURITIES								
5 obligati may conti			burden hour response	1.0							
See Instru 1(b).	See Instruction										
Form 3 H	oldings Section 17				ng Company Act of		1				
Reported Form 4					ompany Act of 194						
Transaction Reported	ons										
Reported											
	Address of Reportin	g Person <u>*</u>	2. Issuer	Name and Tic	eker or Trading	5. Relationship of Reporting Person(s) to					
CONRADE	ES GEORGE H		Symbol		OLOGIES INC	Issuer					
			[AKAN		OLOGIES INC	(Check all applicable)					
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended			_X_Director10% Owner Officer (give titleOther (specify below)below)					
			-	Day/Year)							
		OCIES	12/31/2016			below)	below)				
	IAI TECHNOL BROADWAY	OGIES,									
11 (0.,11 100	(Street)		4 If Δme	endment Date	Original	6 Individual or Io	int/Group Repo	orting			
	(bucct)		4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Reporting					
						(check applicable line)					
CAMPDID		112									
CAMBRIDGE, MA 02142 _X_Form Filed by One Reporting Person											
						Form Filed by M Person	lore than One Re	porting			
(City)	(State)	(Zip)	Tab	le I - Non-Der	ivative Securities Acq	uired, Disposed of,	or Beneficiall	y Owned			
1.Title of	2. Transaction Da		med	3.	4. Securities Acquired		6.	7. Nature of			
Security (Instr. 3)	(Month/Day/Year) Executio any	on Date, if	Transaction Code	(A) or Disposed of (E (Instr. 3, 4 and 5)) Securities Beneficially	Ownership Form: Direct	Indirect Beneficial			
(111501.5)		-	Day/Year)	(Instr. 8)	$(1150.5, \pm a10.5)$	Owned at end		Ownership			

(Instr. 3)		any (Month/Day/Year)	Code (Instr. 8)	(Instr. 3, 4 a	(A) or		Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
Common Stock, par value \$.01 per share	02/03/2016	Â	G	Amount 114,104 (1)	(D) D	Price \$ 0	602,278	D (2)	Â
Common Stock, par value \$.01 per share	10/27/2016	Â	G	3,750 <u>(3)</u>	D	\$ 0	598,528	D (2)	Â

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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. SEC 2270 (9-02)

 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)	4. Transaction Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. of D S G B O E I S F i (I
				4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
CONRADES GEORGE H C/O AKAMAI TECHNOLOGIES, INC. 150 BROADWAY CAMBRIDGE, MA 02142	ÂX	Â	Â	Â		
Signatures						
/s/ James H Hammons Jr, by power of attorney	01/06/2017					
**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) Shares were gifted to the Nightvision GRAT.
- (2) Held by the George Conrades Revocable Trust. Mr. Conrades disclaims beneficial ownership of shares held by such trust except to the extent of his pecuniary interest therein.
- (3) Shares were gifted to the George Conrades Philanhtropy Fund.

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.