Angie's List, Inc. Form 4 July 16, 2015

#### FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB

**OMB APPROVAL** 

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

may continue.

See Instruction

1. Name and Address of Reporting Person _ TRI Ventures, Inc.			Issuer Name and Ticker or Trading     Symbol     Angie's List, Inc. [ANGI]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last) (First) (Middle)		(Middle)	3. Date of Earliest Transaction	(Eliesia dir application)			
			(Month/Day/Year)	DirectorX 10% Owner			
711 BOYLSTON STREET			07/15/2015	Officer (give titleOther (specify below)			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
BOSTON, MA 02116			Filed(Month/Day/Year)	Applicable Line) Form filed by One Reporting Person _X_ Form filed by More than One Reporting Person			

(City)	(State)	(Zip)	Table I - N	lon-Derivative Se	ecurities Ac	quired, Dis	sposed of	f, or Benef	icially Owned
4 551 1 0				. ~		<b>.</b> .		_	

1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securi		•	5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr. 3)	, ,	any (Month/Day/Voor)	Code	Code (Instr. 3, 4 and 5)			Beneficially	Form: Direct	
		(Month/Day/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)
					(A)		Reported Transaction(s)	(Instr. 4)	
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common						\$			See
Stock	07/15/2015		P	3,415	A	6.0688 (1)	11,657,775	I	footnote (2)

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)

#### Edgar Filing: Angie's List, Inc. - Form 4

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. Transactic Code (Instr. 8)	5.  onNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Title Amoun Underly Securiti (Instr. 3	t of ying es	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5)  (A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
TRI Ventures, Inc. 711 BOYLSTON STREET BOSTON, MA 02116		X					
TRI Investments, LLC 711 BOYLSTON STREET BOSTON, MA 02116		X					

### **Signatures**

/s/ Shannon Shaw, attorney-in-fact for TRI Ventures, Inc. and TRI Investments, LLC 07/16/2015

\*\*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).

These transactions were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on July 28, 2014. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$5.97 to

- (1) \$6.07, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within ranges set forth in this Form 4.
- (2) These shares are owned by TRI Investments, LLC, which is a subsidiary of TRI Ventures, Inc. TRI Ventures, Inc. is the indirect beneficial owner of the reported securities.

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.

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