Edgar Filing: ABRAHAM ALLISON H - Form 4

ABRAHAM	ALLISON H											
Form 4												
May 16, 2011	1											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL				
	UNITEL) STATES		ATTIES A			NGE C	OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16.				NGES IN BENEFICIAL OWNERSH SECURITIES				NERSHIP OF	Expires: January 2 Estimated average burden hours per			
Form 4 or Form 5 obligation may conti	Form 4 or Form 5 biligations nay continue. See Instruction 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								0.5			
(Print or Type R	Responses)											
ABRAHAM ALLISON H Symbol OVERS			r Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer						
				(Che					ck all applicable)			
511 NALLS DAIRY CT (Month/D (Street) 4. If Ameri			(Month/D	Date of Earliest Transaction onth/Day/Year) /13/2011				X Director Officer (give t below)	Officer (give title Other (specify			
			nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
GREAT FAI	LLS, VA 22066	6						Form filed by M Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		n Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	05/13/2011			M	2,500	A	\$ 13.92	13,750	D			

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)

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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. Number iomf Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		of Derivative Expiration Date Securities (Month/Day/Ye Acquired A) or Disposed of D) Instr. 3, 4,		7. Title and Amount o Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (A	D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	(1)	05/13/2011		М	2,:	500	<u>(1)</u>	(1)	Common Stock	2,500	\$ 0.

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
ABRAHAM ALLISON H 511 NALLS DAIRY CT GREAT FALLS, VA 22066	Х							
Signatures								
/s/ Mark Harden on behalf of A Abraham	05/16/2011							
<u>**</u> Signature of Reporting Per		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 as to 25% at the close of business on May 13, 2009, 25% at the close of business on May 13, 2010, and the

(1) Onits vest as to 25% at the close of business on May 13, 2009, 25% at the close of business on May 13, 2010, and the remaining 50% at the close of business on May 13, 2011. Vested shares will be delivered to the reprting person promptly after the Restricted Stock Units vest.

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.