## Edgar Filing: RICHARDSON KAREN A - Form 4

RICHARDSC	ON KAREN A	A											
Form 4													
June 04, 2018													
FORM	<b>4 INITE</b>		SECUD	TTIEC		ID EV(	<b>• • • • •</b>	NCE	COMMISSION	r	PPROVAL		
	UNITZ	D STATES				D EXC D.C. 205		NGE (	LOWINISSION	OMB Number:	3235-0287		
Check this	ar.									Expires:	January 31,		
subject to				GES IN BENEFICIAL OWN				LOW	NERSHIP OF	Estimated a	2005 average		
Section 16 Form 4 or			SECURITIES						burden hou	•			
Form 5		oursuant to	Section 16	5(a) of 1	the	Securiti	es Ez	xchang	ge Act of 1934,	response	0.5		
obligation may contin	<sup>s</sup> Section 1							•	f 1935 or Sectio	n			
See Instructure		30(h)	of the Inv	vestmei	nt C	Company	y Act	of 194	40				
	,												
(Print or Type R	esponses)												
1. Name and Address of Reporting Person * RICHARDSON KAREN A2. Issuer Symbol			r Name <b>and</b> Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer					
EXPC			EXPON	ONENT INC [EXPO]					(Check all applicable)				
(Last)	(Last) (First) (Middle) 3. Date of E			Earliest	Earliest Transaction				(check an applicable)				
				h/Day/Year)					X_ Director 10% Owner Officer (give title Other (specify				
149 COMMO	JNWEATHI	JRIVE	05/30/20	)18					below)	below)	er (speeny		
	(Street)		4. If Amer	ndment, l	Date	e Original			6. Individual or Jo	oint/Group Filin	ng(Check		
Filed(Mon			Ionth/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person					
MENLO PA	RK, CA 9402	25							_X_ Form filed by 0 Form filed by M Person				
(City)	(State)	(Zip)	Table	e I - Non	-De	rivative S	Securi	ties Aco	quired, Disposed of	f. or Beneficial	llv Owned		
1.Title of	2. Transaction I	Date 2A. Dee		3.		4. Securi			5. Amount of	6. Ownership	-		
Security	(Month/Day/Year) Execution Date, if			TransactionAcquired (A) or					Securities	Form: Direct	Indirect		
(Instr. 3)		Code /Day/Year) (Instr. 8)			Disposed of (D) (Instr. 3, 4 and 5)			•	(D) or Indirect (I)	Beneficial Ownership			
								Following	· · ·	(Instr. 4)			
							(A)		Reported Transaction(s)				
				Code	v	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	05/30/2018			M <u>(1)</u>		2,021	А	<u>(2)</u>	10,533	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)	Code	TransactionDerivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(1)</u>	05/30/2018		М		2,021	<u>(1)</u>	(2)	Common Stock	2,021
Restricted Stock Units	<u>(3)</u>	05/31/2018		М	1,221		(4)	(2)	Common Stock	1,221

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh					
reporting of the reader that ess	Director	10% Owner	Officer	Other			
RICHARDSON KAREN A 149 COMMONWEATH DRIVE MENLO PARK, CA 94025	Х						
Signatures							
By: Wendy Whitehouse For: Kare Richardson	en	06/04/2018					
**Signature of Reporting Person							

## **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) Reflects the conversion of shares of vested Restricted Stock Units granted on June 1, 2017 into shares of Common Stock on a 1:1 basis.
- (2) Not applicable.
- (**3**) 1-for-1.
- (4) Restricted stock units will cliff-vest on the day prior to the Company's next annual shareholder meeting.

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.