Edgar Filing: Gogo Inc. - Form 4

Gogo Inc.											
Form 4											
August 09, 2	2016										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
UNITED STATES SECURITIES AND EACHANGE COMMISSION									OMB	3235-0287	
Check this box				ashington, D.C. 20549					Number:	January 31,	
if no lon	iger STATEN	AENT OI	ГСНАР	NGES IN BENEFICIAL OWNERSHIP O				FRSHIP OF	Expires: 20		
subject t	.0			SECURITIES					Estimated a	•	
	Section 16. Form 4 or				SECONTIES				burden hours per response 0.5		
Form 5	Filed put	suant to S	Section	16(a) of th	ne Securi	ties E	Exchange	Act of 1934,	10000100	0.0	
obligatio	ons Section 17(-	1935 or Section			
may con <i>See</i> Inst		30(h)	of the In	nvestment	t Compar	iy Ac	t of 1940)			
1(b).											
(Print or Type	Responses)										
1 Name and	Address of Reporting	Person *	0 T		J.T: -1	T		5 Relationship of F	Reporting Pers	on(s) to	
ELDIFRAWI ASH A Symbol				II				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle)	Ũ	of Earliest T	-			(Check	all applicable)	
(Last)	(1131) (.	(vildule)		Day/Year)	Tansaction			Director	10%	Owner	
			08/2016				\underline{X} Officer (give title $$ Other (specify				
							below) below) EVP and CCO				
			nondmont. Data Original								
			Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
							X Form filed by One Reporting Person				
CHICAGO	, IL 60606						ī	Form filed by Mo Person	ore than One Rep	porting	
(City)	(State)	(Zip)				~				. .	
(eng)	(State)	(Eip)	Tab	ole I - Non-l			-	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date			3. 4. Securities Acquired (A)				5. Amount of	6. Ovun anshin	7. Nature of Indirect	
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)		Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially	Form: Direct (D)	Beneficial Ownership	
(Owned			
								Following Reported	or Indirect (I)	(Instr. 4)	
						(A)		Transaction(s)	(I) (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	. ,		
a				coue v	mount		\$				
Common	08/08/2016			Р	50,000	А	10.5604	78,087	D		
Stock							(1)				

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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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			
ELDIFRAWI ASH A 111 N. CANAL STREET, STE 1500 CHICAGO, IL 60606			EVP and CCO				
Signatures							
/s/ Margee Elias, Attorney-in-Fact for ElDifrawi	Ash A.		08/09/2016				
**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).

The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$10.48 to \$10.97, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the

(1) s10.48 to \$10.97, inclusive. The reporting person undertakes to provide to the issuer, any security notice of the issuer, of the start of the st

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.