Edgar Filing: WILLIAMS HARRIS N - Form 4

WILLIAMS H. Form 4 January 02, 201													
FORM	4 UNITED	STATES				ND EX D.C. 20		IGE	COMMISSIO	N	OMB A OMB Number:		5-0287
Check this box if no longer subject to Section 16. SECURITIES STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES LA DESCRIPTION OF CHANGES IN BENEFICIAL OWNERSHIP OWNERSHIP OWNERSHIP OWNERS									ary 31, 2005 0.5				
(Print or Type Res	ponses)												
1. Name and Address of Reporting Person <u>*</u> WILLIAMS HARRIS N			2. Issuer Name and Ticker or Trading Symbol Gogo Inc. [GOGO]				2	5. Relationship of Reporting Person(s) to Issuer					
(Last) (First) (Middle) 111 N. CANAL STREET, STE 1500			3. Date of Earliest Transaction (Month/Day/Year) 12/31/2018					(Check all applicable) <u>X</u> Director Officer (give title 10% Owner below) Dother (specify below)					
	4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 								
CHICAGO, IL	2 60606								Person	,		1 8	
(City)	(State)	(Zip)	Tab	ole I - Nor	n-D	erivative	Securit	ies A	cquired, Disposed	of,	or Beneficia	lly Owne	d
	Transaction Date Ionth/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	Code (Instr. 8)	tion)	4. Securit Acquired Disposed (Instr. 3, 4 Amount	(A) or of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	For (D) (I)	Ownership rm: Direct) or Indirect str. 4)	7. Natur Indirect Benefici Ownersl (Instr. 4)	ial hip
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 1474 (9-02)													

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A)		

Edgar Filing: WILLIAMS HARRIS N - Form 4

Derivative Security				or Dispose (D) (Instr. 3, 4 and 5)				
			Code V	(A)	(D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Share Units	<u>(1)</u>	12/31/2018	А	5,852	<u>(1)</u>	<u>(1)</u>	Common Stock	5,852
Options (Right to Buy)	\$ 2.99	12/31/2018	А	10,413	12/31/2018	12/31/2028	Common Stock	10,413

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WILLIAMS HARRIS N 111 N. CANAL STREET, STE 1500 CHICAGO, IL 60606	Х						
Signatures							
/s/ Margee Elias, Attorney-in-Fact for Harris N.							
Williams			01/02/2019				
**Signature of Reporting Person	Date						
Evenlawetten of Deener							

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) Deferred stock units that are settled in shares of common stock 90 days after the director ceases service as a director.

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.