### Edgar Filing: Tooth Margaret - Form 4

Tooth Marga	aret										
Form 4											
September 0	6, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549						NGE C	COMMISSION	OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 o	ger <b>STATEME</b> 16. pr		F CHANGES IN BENEFICIAL OWNERSHI SECURITIES					Expires:January 31 2009Estimated average burden hours per response0.5			
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type I	Responses)										
Tooth Margaret Symb			2. Issuer Name <b>and</b> Ticker or Trading Symbol TRUPANION, INC. [TRUP]				5. Relationship of Reporting Person(s) to Issuer				
<i>a</i> .								(Check all applicable)			
(Last) C/O TRUPA AVENUE S	e of Earliest Transaction th/Day/Year) 4/2018				Director 10% Owner X_Officer (give title Other (specify below) Chief Marketing Officer						
	(Street) 4. If Amena Filed(Month			-	1		<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li>Form filed by Mara then One Reporting</li> </ul>				
SEATTLE, WA 98108 Form filed by More than One Reporting Person								porung			
(City)	(State) (Zi	<sup>ip)</sup> Tal	ole I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)			Code	Transaction(A) or Disposed of (I Code (Instr. 3, 4 and 5)		d of (D)	Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Comment			Code V	Amount	(D)	Price	(msu. 5 and 4)				
Common Stock	09/04/2018		M <u>(1)</u>	150	А	\$ 4.8	152	D			
Common Stock	09/04/2018		S <u>(1)</u>	150	D	\$ 38.38	2	D			

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)

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 onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secu (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 4.8	09/04/2018		M <u>(1)</u>	150	(2)	11/07/2023	Common Stock	150	\$.

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Tooth Margaret C/O TRUPANION, INC. 6100 4TH AVENUE SOUTH, SUITE 200 SEATTLE, WA 98108			Chief Marketing Officer				
Signatures							
/s/ Anna Szygorski as attorney-in-fact for M Tooth	largaret	0	9/06/2018				
**Signature of Reporting Person			Date				
Explanation of Response	26.						

## 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 exercise and sale reported were effected pursuant to a Rule 10b5-1 trading plan adopted by reporting person on May 31, 2018, in (1) order to implement a plan of financial diversification. Accordingly, the reporting person had no discretion with regard to the timing of the transaction.

The option vested as to 25% of the total shares on October 7, 2014, and then 2.0833% of the total shares vested monthly thereafter, with (2) 100% of the total shares vested and exercisable on October 7, 2017, subject to the reporting person's provision of service to the issuer on

each vesting date.

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.