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FLORANCE Form 4 April 30, 20 FORM Check th if no lon subject to Section Form 4 Form 5 obligation may cons <i>See</i> Instru 1(b).	A 4 UNITED his box ger o 16. or Filed pur Section 17(IENT O resuant to S a) of the	Wa F CHAN Section 1 Public U	shington NGES IN SECUI (6(a) of the second s	h, D.C. 20 I BENEF RITIES he Securit	1CIA ties E	LOWN Exchange y Act of	OMMISSION ERSHIP OF Act of 1934, 1935 or Section	OMB Number: Expires: Estimated a burden hou response	•	
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FLORANCE ANDREW C Symbo				issuer manne and mener of madning				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I	Middle)	3. Date c	of Earliest T	Transaction		-	(Check	all applicable)	
(Month/E C/O COSTAR GROUP, INC., 1331 04/26/2 L STREET, NW				Day/Year) 2018				_X_ Director10% Owner _X_ Officer (give title Other (specify below)			
Filed(Mo				Ionth/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			
	(State)	(Tin)						Person			
(City)	(State)	(Zip)					-	iired, Disposed of,		ly Owned 7. Nature of	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executior any	n Date, if	3. Transacti Code (Instr. 8)	4. Securit oror Dispos (Instr. 3, 4	ed of	(D)	 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Let a 2 = 14) 	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, par value \$0.01 per share	04/26/2018			Code V	Amount 7,782	(D) D	Price \$ 372.34 (1)	(Instr. 3 and 4) 136,870 (2)	D		
Common Stock, par value \$0.01 per share	04/27/2018			S	11,200	D	\$ 371.15 (<u>3)</u>	125,670 (4)	D		
Common Stock, par	04/30/2018			S	5,839	D	\$ 369.05	119,831 <u>(6)</u>	D		

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value \$0.01 per share (5)

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)

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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						
1	Director	10% Owner	Officer	Other			
FLORANCE ANDREW C C/O COSTAR GROUP, INC. 1331 L STREET, NW WASHINGTON, DC 20005	Х		President and CEO				
Signatures							
/s/ Jonathan Coleman, Attorney-in-Fact	04/30/2018						
** 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).

(1) Average based on sales prices ranging from \$372.25 to \$372.56.

(2) Represents all shares of Common Stock owned, consisting of 70,682 shares of Common Stock and 66,188 shares of Common Stock subject to unvested Restricted Stock grants.

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- (3) Average based on sales prices ranging from \$371 to \$371.23.
- (4) Represents all shares of Common Stock owned, consisting of 59,482 shares of Common Stock and 66,188 shares of Common Stock subject to unvested Restricted Stock grants.
- (5) Average based on sales prices ranging from \$369 to \$369.61.
- (6) Represents all shares of Common Stock owned, consisting of 53,643 shares of Common Stock and 66,188 shares of Common Stock subject to unvested Restricted Stock grants.

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.