#### Edgar Filing: DIGITAL RIVER INC /DE - Form 4

DIGITAL RI	VER INC /DE											
Form 4												
December 02	, 2013											
FORM	4										PPROVAL	
	UNITEDS	STATES				ID EXC ).C. 205		IGE (	COMMISSION	OMB Number:	3235-0287	
Check thi										Expires:	January 31,	
subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSE						NERSHIP OF	Estimated average 200				
Section 10		SECURITIES								burden hours per		
Form 4 or										response	•	
Form 5 obligation	· ·							•	e Act of 1934,			
may conti				•		•	• •		f 1935 or Section	n		
See Instru	ction	30(h) (	of the Inv	estmen	t C	Company	Act	of 194	10			
1(b).												
(Print or Type R	(esponses)											
(I IIII of Type I	(100p 011000)											
1. Name and A	ddress of Reporting F	erson <sup>*</sup>	2. Issuer	Name <b>an</b>	d T	icker or T	Frading	J	5. Relationship of	Reporting Per	son(s) to	
				2. Issuer Name <b>and</b> Ticker or Trading Symbol					Issuer			
•				L RIVE	ER	INC /D	E [DI	RIV]				
				3. Date of Earliest Transaction					(Check all applicable)			
(Lust)	(11150) (115		(Month/Da		l I all	isaction			Director	10%	o Owner	
C/O DIGITA	AL RIVER, INC.,		12/02/20	-					Officer (give	e title Oth	er (specify	
BREN ROA									below)	below) GM of Comme	arce	
			4 70 4			o · · · 1						
				If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check			
			Filed(Mont	in/Day/Yea	ar)				Applicable Line) _X_ Form filed by (	One Reporting Pe	erson	
MINNETON	NKA, MN 55343-	9072							Form filed by M Person			
(City)	(State) (	Zip)	Table	e I - Non-l	Dei	rivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Date	2A. Deen	ned	3.		4. Securit	ies Ac	auired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution				(A) or Di			Securities	Form: Direct		
(Instr. 3)		any	Code (D)					Beneficially	/ -	Beneficial		
		(Month/D	ay/Year)	(Instr. 8)	) (	(Instr. 3, 4	and t	<b>)</b> )	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
									Reported	(1150. 7)	(11501. 7)	
							(A) or		Transaction(s)			
				Code V	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	12/02/2013			А		50,000	A	\$0	50,000	D		
Stock	12/02/2013			11	(	(1)	11	ψυ	50,000	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (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	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Peterson Thomas E.							
C/O DIGITAL RIVER, INC.	EVP & GM						
10380 BREN ROAD WEST			of Commerce				
MINNETONKA, MN 55343-9072							

## Signatures

/s/ Kevin Crudden as Attorney-in-Fact for Thomas E. Peterson pursuant to Power of Attorney previously filed.					
**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) The shares are subject to forfeiture and shall vest in four annual installments.

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.