

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *					2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer					
														(Check all app	licable)			
<b>Lore Marc F</b>	Ξ.				W	/alm	art Ir	ıc. [ WN	ЛT	]								
(Last) (First) (Middle)					3.	Date	of Earl	iest Trans	actio	n (MM/	DD/YYYY	7)	Director 10% Owner					
(													X Officer (give title below) Other (specify below)  Executive Vice President					
221 RIVER STREET, 8TH FLOOR								6/2	6/2	018			Executive Vic	e Presido	ent			
<del>-</del> I	(Stre	•			4.	If An	nendme	nt, Date (	)rigi	nal File	ed (MM/D	D/YY	YY)	6. Individual o	or Joint/G	roup Filing (	Check Appl	icable Line)
***																		
HOBOKEN, NJ 07030														X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)														1 of the field by More than one Reporting Letson				
			Table	I - Non	ı-De	rivati	ive Sec	urities Ac	quir	red, Di	sposed o	of, or	Ber	neficially Owne	ed			
				2. Trans.	Date	te 2A. Deemed Execution		3. Trans. Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. 7. Nature of Indirect		
(Instr. 3)						Date, if any		(IIISII. 8)		(Instr. 3, 4				(Instr. 3 and 4)	11ansaction(s)	Form:	Beneficial	
																	Direct (D) or Indirect	Ownership
											(A) or						(I) (Instr.	(111301. 4)
								Code	V	Amoun	t (D)	Pric	e				4)	
Common 6/26/2				6/26/20	)18			F		21880 (1)	D	\$86.4	17	3300723		D		
			ı			I					1	1					<u> </u>	
	Tab	le II - Dei	rivative	Securi	ties	Bene	ficially	Owned (	e.g.	, puts,	calls, w	arrai	nts,	options, conve	rtible sec	urities)		
Title of Derivate	2.	3. Trans.	3A. Dee	emed 4.	Trans.	Code	5. Numb	er of	6. D	ate Exer	cisable and	7. Tit	le an	d Amount of	8. Price of	9. Number of	10.	11. Nature
Security (Instr. 3)	Conversion	Date	Execution	on (Instr. 8		Acquire Dispose		ired (A) or osed of (D)		Expiration Date Securities Derivative (Instr. 3 an						derivative Securities	Ownership Form of	of Indirect Beneficial
(Instr. 3)	or Exercise Price of Derivative Security		Date, II												(Instr. 5)	Beneficially	Derivative	Ownership
						(Instr. 3,		4 and 5)								Owned Following	Security: Direct (D)	(Instr. 4)
						ode V	(A)	(D)	Date	e	Expiration	Title		ount or Number of		Reported	or Indirect	
					Code				Exer	rcisable	Date	Title	Sha	ires		Transaction(s) (Instr. 4)	(I) (Instr. 4)	
					40	<u> </u>	()	(2)				ļ	!			(	''	
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#### **Explanation of Responses:**

(1) Represents stock units withheld to satisfy tax withholding obligations upon the partial vesting of previously reported 3,554,093 restricted stock units (the "RSUs") that were granted to the Reporting Person on September 19, 2016, in connection with, and in consideration of, the Issuer's acquisition of Jet.com, Inc. and the Reporting Person becoming an employee and executive officer of the Issuer. The Reporting Person cannot exercise voting rights over the remaining portion of the unvested RSUs.

### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Lore Marc E.								
221 RIVER STREET, 8TH FLOOR			Executive Vice President					
HOBOKEN, NJ 07030								

## **Signatures**

/s/ Kristopher A. Isham, by power of attorney

\*\*Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.