## Edgar Filing: BLUE NILE INC - Form 4

DI LIE NILE INC

BLUE NIL	E INC									
Form 4	-									
May 11, 20									PROVAL	
FORM	$\Lambda 4$ united	4 UNITED STATES SECURITIES AND EVOLUTION CONDUCTION								
	UNITED	Washington, D.C. 20549						OMB Number:	3235-0287	
Check t if no lor	nger	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							January 31, 2005	
subject Section	to STATEN								iverage rs per	
Form 4		~ .		. ~				response	0.5	
Form 5 obligati		rsuant to Section				-				
may con			•	•	-	•	1935 or Section	l		
See Inst	ruction	30(h) of th	e Investmen	it Compa	ny A	ct of 1940	)			
1(b).										
(Print or Type	Responses)									
4 37 1		D *								
	Address of Reporting		6				5. Relationship of Reporting Person(s) to Issuer			
GASTON DWIGHT			Symbol							
		BLU	BLUE NILE INC [NILE]				(Check all applicable)			
(Last)	(First) (		te of Earliest	Fransactior	I					
			(Month/Day/Year) 05/09/2007				Director 10% Owner X Officer (give title Other (specify below) below)			
(Street) 4			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
		Filed	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
SEATTI E	, WA 98104						_A_ Form filed by O			
SEATTLE	, WA 90104					:	Person			
(City)	(State)	(Zip)	Table I - Non-	Derivative	e Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date (Month/Day/Year)	A. Deemed	3.	1 、				6.	7. Nature of	
Security		Execution Date,		oror Dispo			Securities	Form:	Indirect Beneficial Ownership	
(Instr. 3)		any (Month/Day/Ye	Code ar) (Instr. 8)	(Instr. 3,	4 and	5)	Beneficially Owned			
		(11011011204), 10	(1115417-0)				Following	or Indirect	(Instr. 4)	
					(A)		Reported	(I)		
					or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
G			Code V	Amount	(D)	Price	(instr. 5 und 1)			
Common Stars $(1)$	05/09/2007		<b>S</b> (1)	2,000	D	\$ 55	7,300	D		
Stock $(1)$				(1)						
						*				
Common						\$				
Common Stock	05/11/2007		S	2,691	D	\$ 54.4389 (2)	0	Ι	By Wife	

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.

## Edgar Filing: BLUE NILE INC - Form 4

 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. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Ac	ldress	Relationships						
		Director	10% Owner	Officer	Other			
GASTON DWIGHT C/O BLUE NILE, INC. 705 FIFTH AVENUE S, ST SEATTLE, WA 98104	ГЕ 900			Senior VP				
Signatures								
/s/ Dwight Gaston	05/11/20	07						
<u>**</u> Signature of	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) This sale was affected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- (2) Represents the weighted average sale price. The highest price at which shares were sold was \$54.50 and the lowest price at which shares were sold was \$54.34.

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.

Reporting Person