Edgar Filing: MILLER MARTIN H - Form 4

MILLER MA Form 4 May 28, 2013											
FORM										PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this if no long	er								Expires:	January 31,	
subject to STATEMENT OF CHANGES I					S IN BENEFICIAL OWNERSHIP OF					2005 average	
					CURITIES				burden hou	irs per	
Form 4 or Form 5	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5		
obligation	¹⁸ Section	^					-	of 1935 or Section	m		
may conti See Instru	nue.) of the Inv	•	•	- ·			<u>, , , , , , , , , , , , , , , , , , , </u>		
1(b).											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Issuer MILLER MARTIN H Symbol Issuer						f Reporting Per	Reporting Person(s) to				
Symbol											
			EFLY INC [BFLY]				(Check all applicable)				
			of Earliest Transaction				V Director 100 Orman				
C/O BLUEFLY, INC., 42 WEST 05/23/20				/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify			
39TH STRE			03123120	/15				below)	below)		
	(Street)		4 If Amer	ndment Dat	e Original			6 Individual or I	oint/Groun Fili	nø(Check	
			ndment, Date Original th/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			
NEW YORK	K, NY 10018							Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction	Date 2A. Dec	emed	3.	4. Securi	ties		5. Amount of	6. Ownership 7. Na	7. Nature of	
Security	(Month/Day/Y	'ear) Executi	on Date, if TransactionAcquired (A) or Code Disposed of (D)					Beneficially (Form: Direct	Indirect	
(Instr. 3)		any (Month								Beneficial Ownership	
(Month/Day/Yea) (Instr. 8) (Instr. 3, 4 and 5)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Comment				Code V	Amount	(D)	Price	(insure and T)			
Common Stock	05/23/2013			D <u>(1)</u>	3,942	D	\$ 0.1	0	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)

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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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addre	ess	Relationships							
	Director	10% Owner	Officer	Other					
MILLER MARTIN H C/O BLUEFLY, INC. 42 WEST 39TH STREET NEW YORK, NY 10018	Х								
Signatures									
/s/ Martin Miller	05/24/2013								
**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).
- Pursuant to the terms of the Stock Purchase Agreement by and between Bluefly, Inc. and Runway Acquisition Sub, Inc., dated as of May
 (1) 23, 2013, each issued and outstanding share of common stock was automatically canceled and converted into the right to receive a per share amount equal to \$0.10 in cash, without interest.

Remarks:

Reporting Person

As of May 23, 2013, Martin Miller will no longer be a director of Bluefly, Inc.

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.