

Bazaarvoice Inc
Form 3
August 20, 2014

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â ALLISON GARY G		(Month/Day/Year)	Bazaarvoice Inc [BV]	
(Last)	(First)	08/15/2014		
3900 N. CAPITAL OF TEXAS HIGHWAY, Â SUITE 300			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)				
AUSTIN, Â TX Â 78746			(Check all applicable)	
(City)	(State)	(Zip)	<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below) (specify below)	
			Executive VP, Engineering	
			6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	50,000 ⁽¹⁾	D	Â
Common Stock	18,200 ⁽²⁾	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Stock Options (Right to Buy)	Â (3)	12/16/2023	Common Stock	180,000	\$ 7.18	D	Â
Stock Options (Right to Buy)	Â (4)	06/10/2024	Common Stock	35,500	\$ 7.53	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ALLISON GARY G 3900 N. CAPITAL OF TEXAS HIGHWAY SUITE 300 AUSTIN, TX 78746	Â	Â	Â Executive VP, Engineering	Â

Signatures

/s/ Bryan C. Barksdale (as Attorney-in-Fact for Gary G. Allison) 08/20/2014

__Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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 restricted stock units vest in four (4) equal yearly installments, with the first such installment vesting effective December 20, 2014.
- (2) The restricted stock units vest in four (4) yearly installments, with the first such installment vesting effective June 20, 2015.
- (3) 1/4th of the shares subject to the option vest and become exercisable on December 16, 2014, and 1/48th of the shares subject to the option vest and become exercisable on the corresponding day of each month thereafter.
- (4) 1/4th of the shares subject to the option vest and become exercisable on June 10, 2015, and 1/48th of the shares subject to the option vest and become exercisable on the corresponding day of each month thereafter.

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.