Edgar Filing: JETBLUE AIRWAYS CORP - Form 4

| JETBLUE Al Form 4 February 18, | IRWAYS CO 2015 | RP | | | | | | | | | |
|--|---|---|-------|--|--------------|---|--|---|---|------------------------|--|
| FORM | 4 UNITE | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB | Number: 3235-0287 | |
| Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b). | er STATI 5. Filed p s Section 1 | | | | | | | | Expires: Estimated a burden hou response | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| PETERSON JOEL CLINTON Syr JE | | | | 2. Issuer Name and Ticker or Trading Symbol JETBLUE AIRWAYS CORP [JBLU] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (M | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/13/2015 | | | | X Director Officer (give below) | | 6 Owner er (specify | |
| | (Street) | Street) 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | |
| LONG ISLA | ND CITY, N | Y 11101 | | | | | | Form filed by M Person | More than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-Do | erivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction I (Month/Day/Ye | ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year) | | 3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common stock | 02/13/2015 | | | А | 3,565 (1) | А | \$0 | 47,969 | 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) | 3A. Deemed Execution Date, if any (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 | 7. Titl Amou Under Securi (Instr. | nt of lying | 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 JOEL CLINTON JETBLUE AIRWAYS CORPORATION 27-01 QUEENS PLAZA NORTH LONG ISLAND CITY, NY 11101 | х | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Joel Peterson by power of attorney | 02/18/20 | 15 | | | | | | |
| **Signature of Reporting Person | Date | | | | | | | |
| Explanation of Responses: | | | | | | | | |

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).
- These are director deferred stock units which are subject to a one year vesting period, commencing on the vesting commencement date of (1) February 13, 2015, and are payable only in common shares six months following the departure of the director from the JetBlue board of directors.

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.