Edgar Filing: Gibbs Samuel C III - Form 4

Form 4	el C III										
October 05,										PROVAL	
FORM		RITIES AND EXCHANGE COMMISSIO ashington, D.C. 20549					OMB OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 c	F CHANGES IN BENEFICIAL OWNE SECURITIES					NERSHIP OF	Expires: Estimated a burden hou response	•			
Form 5 obligatio may com <i>See</i> Instr 1(b).	tinue. Section 17(a) of the	Public U		ling Con	npan	y Act of	e Act of 1934, 1935 or Section 0	n		
(Print or Type]	Responses)										
1. Name and Address of Reporting Person <u>*</u> Gibbs Samuel C III			2. Issuer Name and Ticker or Trading Symbol eHealth, Inc. [EHTH]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Middle)	3. Date of Earliest Transaction (Check					k all applicable	2))		
C/O EHEALTH, INC., 440 EAST MIDDLEFIELD RD			(Month/Day/Year) 10/03/2011					Director 10% Owner X Officer (give title Other (specify below) Pres., eHealth Gov. Systems			
				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 			
MOUNTAI	N VIEW, CA 940	043						Person	lore than One Re	porung	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	ned n Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	10/03/2011			Code V S(1)	Amount 1,000	(D) D	Price \$ 13.52	(instr. 5 and 4) 3,000	Ι	By Trust	
Common Stock								11,470	D		

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

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 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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and int of rlying ities . 3 and 4)	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 / Address	Relationships						
	Director	10% Owner	Officer	Other			
Gibbs Samuel C III C/O EHEALTH, INC. 440 EAST MIDDLEFIELD RD MOUNTAIN VIEW, CA 94043			Pres., eHealth Gov. Systems				
Signatures							
/s/ Jennifer Cashio, as attorney-in	-fact for	Samuel C.	10/05/2011				

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 transaction was effected pursuant to a Rule 10b5-1 trading plan.

**Signature of Reporting Person

(2) Shares are held by Samuel C Gibbs & Cynthia B Gibbs, TTEEs u/a DTD 4/27/1995 Gibbs Revocable Trust.

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.

Date

Gibbs III