

EDGEWATER TECHNOLOGY INC/DE/

Reported by WHELAN TIMOTHY

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 06/16/17 for the Period Ending 06/14/17

Address 200 HARVARD MILL SQUARE

SUITE 210

WAKEFIELD, MA 01880

Telephone 781-213-9854

CIK 0001017968

Symbol EDGW

SIC Code 7370 - Computer Programming, Data Processing, And

Industry IT Services & Consulting

Sector Technology

Fiscal Year 12/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2. I	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Whelan Timothy						EDGEWATER TECHNOLOGY INC/DE/ [EDGW]								X Director	,	1	0% Owner	
(Last) (Firs	st) (M	iddle)		3. I	Date	of Earli	est Trans	actio	n (MM	/DD/YYY	YY)		Officer (giv	e title below	()O	ther (specify	below)
33 INWOO	D ROAD							6/1	4/20	17								
	(Str	reet)			4. I	f Ar	nendme	nt, Date (Origin	nal Fi	led (MM/	DD/YY	YYY)	6. Individual o	or Joint/G	roup Filing (Check Appl	icable Line)
ESSEX FEI		070221 (Zi	ip)											X Form filed b	y One Repo More than (rting Person One Reporting P	erson	
			Table !	I - Non	ı-Der	ivat	ive Secu	ırities Ac	quir	ed, D	isposed	of, o	r Be	neficially Owne	ed			_
1. Title of Security (Instr. 3) 2. Trans. D						3. Trans. Code (Instr. 8)		4. Securities Acquor Disposed of (E) (Instr. 3, 4 and 5)		Ď) .	. 1	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)				7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	V	Amou	(A) (D)		rice				(I) (Instr. 4)	(IIISII. 4)
Common Stock 6/14/201			17	A 2700 A \$0.01 2700			D											
	Tak	ole II - Der	ivative	Securi	ities I	Bene	ficially	Owned (e.g.	, puts	, calls,	warra	ants,	options, conve	rtible sec	urities)		
(Instr. 3)	Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deer Execution Date, if a	on (Instr. 8)		Code	Derivative Acquired Disposed	Number of erivative Securities equired (A) or sposed of (D) sstr. 3, 4 and 5)				7. Title and A Securities Ur Derivative So (Instr. 3 and		Underlying Security	nderlying Derivative security Security		Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Coe	Code	V	(A)	(D)	Date Exerc	isable	Expiratior Date	Title		Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Stock Option	\$6.99	6/14/2017			A		5400		6/14/2		6/14/2023		mmon ock	5400	\$0.00	5400	D	

Explanation of Responses:

- (1) Option grant vests quarterly over a one year period from the date of grant.
- (2) Restricted Stock Award at the par value of \$.01 per share under the EDGW 2012 Omnibus Incentive Plan, subject to forfeiture, based on time vesting provisions.

Reporting Owners

reporting Owners										
Paparting Owner Name / Addre	20	Relationships								
Reporting Owner Name / Addre	Director	10% Owner	officer	Other						
Whelan Timothy										
33 INWOOD ROAD	X									
ESSEX FELLS, NJ 070221										

Signatures

Timothy R. Oakes, Attorney In Fact

Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.