

FIREEYE, INC. Reported by ROBBINS WILLIAM T

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 12/29/16 for the Period Ending 12/27/16

Address 1440 MCCARTHY BLVD

MILPITAS, CA 95035

Telephone 408-321-6300

CIK 0001370880

Symbol FEYE

SIC Code 3577 - Computer Peripheral Equipment, Not Elsewhere Classified

Industry Software

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.]	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Robbins William T					Fi	FireEye, Inc. [FEYE]								nicable)				
(Last)	(Last) (First) (Middle)				3.]	3. Date of Earliest Transaction (MM/DD/YYYY)							Director10% Owner X Officer (give title below) Other (specify below)					
C/O FIREEYE, INC., 1440 MCCARTHY BLVD.						12/27/2016							EVP, WW Sa		Jw)	Other (speci	iy ociow)	
(Street)					4.]	4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)					
MILPITAS,	CA 9503 ity) (Sta			e I - No	on-Dei	rivat	ive Secu	ırities Ac	quir	ed, Di	sposed	of, o	or Be	X_Form filed by	More than (rting Person One Reporting F	erson	
			. Date	2A. Deer Executio Date, if a		ecution (Instr. 8)		<u> </u>		uired		5. Amount of Securities Beneficially (Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D)	Beneficial Ownership		
								Code	V	Amou	nt (A) (D)		Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock 12/27/2016				2016			A		20000 (1)	0 A	\$	60.00	200000		D			
Common Stock 12/27/2016				2016			A		12500 (2)	0 A	\$	60.00	325000		D			
	Tab	le II - Der	ivativ	e Secui	rities]	Bene	ficially	Owned (e.g.	, puts,	calls, v	varr	rants	, options, conve	rtible sec	curities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	Date	Execut	A. Deemed xecution (Inst		Acquire Dispose				Date Exercisable and piration Date		Se	curitie erivativ	and Amount of es Underlying we Security and 4)	8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security				Code	V	(A)	(D)	Date Exe	e rcisable	Expiratio Date	n Tit		mount or Number of nares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

- (Represents shares underlying restricted stock units ("RSUs"). The RSUs will vest with respect to 25% of the underlying shares on November 15, 2017, and
- 1) with respect to an additional 6.25% of the underlying shares every three months thereafter, in each case subject to the Reporting Person's continued service through the applicable vesting date.
- (Represents shares underlying restricted stock units ("RSUs"). The RSUs will vest in full on January 2, 2017, subject to the Reporting Person's continued
- 2) service through such date.

Reporting Owners

Paparting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Robbins William T							
C/O FIREEYE, INC.			EVP, WW Sales				
1440 MCCARTHY BLVD.			EVI, WW Sales				
MILPITAS, CA 95035							

Signatures

Louise Carbone, Attorney-in-Fact	12/29/2016			
** 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.