## Edgar Filing: Under Armour, Inc. - Form 4

| Form 4                                                                                                 |                                         |                                                                                                                                                        |                                                                                               |                                        |                        |                                          |               |                                                                                                                            |                                                                                                        |                      |  |
|--------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------|------------------------|------------------------------------------|---------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|----------------------|--|
| February 19,<br>FORM                                                                                   |                                         |                                                                                                                                                        |                                                                                               |                                        |                        |                                          |               |                                                                                                                            |                                                                                                        | PPROVAL<br>3235-0287 |  |
| Check this<br>if no long<br>subject to<br>Section 16<br>Form 4 or<br>Form 5<br>obligation<br>may conti | Filed purs                              | ENT OF CHANGES IN BENEFICIAL OWN<br>SECURITIES<br>suant to Section 16(a) of the Securities Exchange<br>a) of the Public Utility Holding Company Act of |                                                                                               |                                        |                        |                                          |               | ge Act of 1934,                                                                                                            | January 31       Expires:     200       Estimated average       burden hours per       response     0. |                      |  |
| See Instru<br>1(b).                                                                                    |                                         | 30(h) of                                                                                                                                               | f the Inv                                                                                     | vestment (                             | Compan                 | y Act                                    | of 194        | 40                                                                                                                         |                                                                                                        |                      |  |
| (Print or Type R                                                                                       | esponses)                               |                                                                                                                                                        |                                                                                               |                                        |                        |                                          |               |                                                                                                                            |                                                                                                        |                      |  |
|                                                                                                        |                                         |                                                                                                                                                        | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>Under Armour, Inc. [UA]              |                                        |                        |                                          |               | 5. Relationship of Reporting Person(s) to Issuer                                                                           |                                                                                                        |                      |  |
| (Last)                                                                                                 | (First) (N                              |                                                                                                                                                        |                                                                                               | , í                                    |                        |                                          |               | (Cheo                                                                                                                      | ck all applicable                                                                                      | e)                   |  |
| (I<br>1020 HULL STREET 0<br>(Street) 4                                                                 |                                         |                                                                                                                                                        | <ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>02/15/2014</li></ul> |                                        |                        |                                          |               | Director       10% Owner         Officer (give title below)       Other (specify below)         COO & President of Product |                                                                                                        |                      |  |
|                                                                                                        |                                         |                                                                                                                                                        | 4. If Amendment, Date Original<br>Filed(Month/Day/Year)                                       |                                        |                        |                                          |               | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person                    |                                                                                                        |                      |  |
| BALTIMOR                                                                                               | RE, MD 21230                            |                                                                                                                                                        |                                                                                               |                                        |                        |                                          |               | Form filed by M<br>Person                                                                                                  | More than One Ro                                                                                       | eporting             |  |
| (City)                                                                                                 | (State) (                               | (Zip)                                                                                                                                                  | Table                                                                                         | I - Non-De                             | erivative S            | Securi                                   | ties Ace      | quired, Disposed o                                                                                                         | of, or Beneficial                                                                                      | lly Owned            |  |
| 1.Title of<br>Security<br>(Instr. 3)                                                                   | 2. Transaction Date<br>(Month/Day/Year) |                                                                                                                                                        | Date, if                                                                                      | 3.<br>Transactic<br>Code<br>(Instr. 8) | Disposed<br>(Instr. 3, | l (A) o<br>l of (D<br>4 and<br>(A)<br>or | )<br>5)       | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)         | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)                                   |                      |  |
| Class A<br>Common<br>Stock                                                                             | 02/15/2014                              |                                                                                                                                                        |                                                                                               | Code V<br>F                            |                        | (D)<br>D                                 | Price<br>\$ 0 | 116,876                                                                                                                    | 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)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         |                                                             | Code V                                | (A) (D)                                                                                                                 | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |                                                     |                                                                            |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                   | ress Relationships |           |                            |       |  |  |  |  |
|---------------------------------------------------------|--------------------|-----------|----------------------------|-------|--|--|--|--|
| I B                                                     | Director           | 10% Owner | Officer                    | Other |  |  |  |  |
| Fulks Kip J<br>1020 HULL STREET<br>BALTIMORE, MD 21230  |                    |           | COO & President of Product |       |  |  |  |  |
| Signatures                                              |                    |           |                            |       |  |  |  |  |
| /s/ John P. Stanton, Attorney in Fact for: Kip J. Fulks |                    |           | 02/19/2014                 |       |  |  |  |  |
| <u>**</u> Signature of Reporting F                      | Person             |           | Date                       |       |  |  |  |  |
| <b>Explanation of Re</b>                                | spon               | ses:      |                            |       |  |  |  |  |

\* 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. 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.