

Patchen Michael Robert
 Form 3
 July 28, 2011

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Patchen Michael Robert		(Month/Day/Year)	STAMPS.COM INC [STMP]	
(Last)	(First)	(Middle)	07/20/2011	
12959 CORAL TREE PLACE		4. Relationship of Reporting Person(s) to Issuer		
(Street)		(Check all applicable)		
LOS ANGELES,Â CAÂ 90066		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) VP, Information Technology		
(City)	(State)	(Zip)	5. If Amendment, Date Original Filed(Month/Day/Year)	
1. Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,325	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

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				Shares		(I) (Instr. 5)	
Stock Option (Common Stock)	05/20/2011 ⁽¹⁾	05/20/2021	Common Stock	100,000	\$ 12.55	D	Â
Stock Option (Common Stock)	03/03/2008 ⁽²⁾	03/03/2018	Common Stock	9,000	\$ 8.77	D	Â
Stock Option (Common Stock)	06/01/2007 ⁽³⁾	06/01/2017	Common Stock	12,000	\$ 13.1	D	Â
Stock Option (Common Stock)	07/03/2006 ⁽⁴⁾	07/03/2016	Common Stock	7,000	\$ 20.02	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Patchen Michael Robert 12959 CORAL TREE PLACE LOS ANGELES, CA 90066	Â	Â	Â VP, Information Technology	Â

Signatures

/s/ Matthew A. Lipson, by Power of Attorney for Michael Patchen
 07/28/2011
 **Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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 option vests monthly in equal parts over a three year period. The first vesting date is June 20, 2011.
- (2) This option vests monthly in equal parts over a four year period. The first vesting date is April 3, 2008.
- (3) This option vests monthly in equal parts over a four year period. The first vesting date is July 1, 2007.
- (4) This option vests monthly in equal parts over a four year period but with a 1 year "cliff" in the first year after grant. The first vesting date is July 3, 2007.

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.