

Financial Engines, Inc.
Form 3
February 03, 2016

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 Warburg Pincus Private Equity X, L.P.			(Month/Day/Year)	Financial Engines, Inc. [FNGN]	
(Last)	(First)	(Middle)	02/01/2016	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
C/O WARBURG PINCUS LLC,Â 450 LEXINGTON AVENUE				(Check all applicable)	
(Street)				<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
NEW YORK,Â NYÂ 10017				<input type="checkbox"/> Officer (give title below)	<input type="checkbox"/> Other (specify below)
(City)	(State)	(Zip)			<input type="checkbox"/> Form filed by One Reporting Person
					<input checked="" 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)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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 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	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Warburg Pincus Private Equity X, L.P. C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017	X	X		
Warburg Pincus X Partners, L.P. C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017	X	X		
Warburg Pincus X, L.P. C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017	X	X		
Warburg Pincus X GP L.P. C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017	X	X		
WPP GP LLC C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017	X	X		
Warburg Pincus Partners, L.P. C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017	X	X		
Warburg Pincus Partners GP LLC C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017	X	X		
WARBURG PINCUS & CO. C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017	X	X		
KAYE CHARLES R C/O WARBURG PINCUS LLC 450 LEXINGTON AVENUE NEW YORK, NY 10017		X		

Landy Joseph P.
 C/O WARBURG PINCUS LLC
 450 LEXINGTON AVENUE
 NEW YORK, NY 10017

Â Â X Â Â

Signatures

WARBURG PINCUS PRIVATE EQUITY X, L.P., By: WP X LP, its general partner ("GP"),
 By: WP X GP, its GP, By: WPP GP, its GP, By: WP Partners, its managing member ("MM"),
 By: WPP GP LLC, its GP, By: WP, its MM, By: /s/ Robert B. Knauss, Partner 02/01/2016

__Signature of Reporting Person Date

WARBURG PINCUS X PARTNERS, L.P., By: WP X LP, its GP, By: WP X GP, its GP, By:
 WPP GP LLC, its GP, By: Warburg Pincus Partners, L.P., its MM, By: Warburg Pincus GP
 LLC, its GP, By: Warburg Pincus & Co., its MM, By: /s/ Robert B. Knauss, Partner 02/01/2016

__Signature of Reporting Person Date

WARBURG PINCUS X, L.P., By: Warburg Pincus X GP L.P., its GP, By: WPP GP LLC, its
 GP, By: Warburg Pincus Partners, L.P., its MM, By: Warburg Pincus Partners GP LLC, its GP,
 By: Warburg Pincus & Co., its MM, By: /s/ Robert B. Knauss, Partner 02/01/2016

__Signature of Reporting Person Date

WARBURG PINCUS X GP L.P., By: WPP GP LLC, its GP, By: Warburg Pincus Partners,
 L.P., its MM, By: Warburg Pincus Partners GP LLC, its GP, By: Warburg Pincus & Co., its
 MM, By: /s/ Robert B. Knauss, Partner 02/01/2016

__Signature of Reporting Person Date

WPP GP LLC, By: Warburg Pincus Partners, L.P., its Managing Member, By: Warburg Pincus
 Partners GP LLC, its General Partner, By: Warburg Pincus & Co., its Managing Member, By:
 /s/ Robert B. Knauss, Partner 02/01/2016

__Signature of Reporting Person Date

WARBURG PINCUS PARTNERS, L.P., By: Warburg Pincus Partners GP LLC, its General
 Partner, By: Warburg Pincus & Co., its Managing Member, By: /s/ Robert B. Knauss, Partner 02/01/2016

__Signature of Reporting Person Date

WARBURG PINCUS PARTNERS GP LLC, By: Warburg Pincus & Co., its Managing
 Member, By: /s/ Robert B. Knauss, Partner 02/01/2016

__Signature of Reporting Person Date

WARBURG PINCUS & CO., By: /s/ Robert B. Knauss, Partner 02/01/2016

__Signature of Reporting Person Date

CHARLES R. KAYE, By: /s/ Robert B. Knauss, Attorney-in-Fact* 02/01/2016

__Signature of Reporting Person Date

JOSEPH P. LANDY, By: /s/ Robert B. Knauss, Attorney-in-Fact* 02/01/2016

__Signature of Reporting Person Date

Explanation of Responses:

No securities are beneficially owned

* 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).

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Remarks:

Exhibit 99.1 to this Form 3 is incorporated herein by reference. Due to limitations on the number

Due to the limitations on the number of Reporting Persons allowed on each Form 3, WP LLC is

* Power of Attorney given by each of Mr. Kaye and Mr. Landy was previously filed with the

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.