FORM 4
Check this box if no

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

(Print or Type Responses)

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

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#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Ations See bit 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 F PHELPS BARRY	2. Issuer Name <b>and</b> Ticker or Trading Symbol U.S. Auto Parts Network, Inc. [PRTS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
305 SCARBOROUGH	(First) H ST.		3. Date of Earliest Transaction (Month/Day/Year) 05/20/2015							her (specify belo	w)
THOUSAND OAKS,	4	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1. Title of Security 2. Transaction   (Instr. 3) Date   (Month/Day/Yea)			2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)			Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership

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 SEC 1474 (9-02) 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)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numb	ber	6. Date Exercisa	ble and	7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of		Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)		Code		Derivati	ve	(Month/Day/Yea	ur)	Underlying		Security	Securities	Form of	Beneficial
· · · · ·	Price of		(Month/Day/Year)	(Instr. 8)	)	Securities				Securities		< / /	~	Derivative	1
	Derivative					-	-		(Instr. 3 and 4)			2	(Instr. 4)		
	Security					(A) or							0	Direct (D)	
						Dispose	d of						1	or Indirect	
						(D) (Insta 2	4						Transaction(s)		
						(Instr. 3, and 5)	4,						(Instr. 4)	(Instr. 4)	
						and 5)	r		1						
											Amount				
								Date	Expiration	Title	or Number				
								Exercisable	Date		Number of				
				Code	v	(A)	(D)				Shares				
C+ 1				coue		(11)	(2)				onares				
Stock															
Options	\$ 2.33	05/20/2015		А		20,000		05/20/2016 <mark>(2)</mark>	05/19/2025	Common Stock	20,000	\$ 0	225,000	D	
(Right to		05/20/2015		11		20,000		03/20/2010	03/17/2023	Stock	20,000	ΨŪ	223,000	Б	
Buy) (1)															

# **Reporting Owners**

Demotion Ormer News (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
PHELPS BARRY 305 SCARBOROUGH ST. THOUSAND OAKS, CA 91361	Х							

### **Signatures**

/s/ Bryan P. Stevenson, as Attorney-in-Fact for Barry Phelps	05/20/2015
Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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).
- (1) Granted pursuant to the U.S. Auto Parts Network, Inc. 2007 Omnibus Incentive Plan.
- (2) Thirty-three percent (33%) of the option shares vest and become exercisable upon the first anniversary of the date of grant, and thereafter the balance of the option shares vest and become exercisable in a series of twenty-four equal monthly installments over the two year period measured from the one year anniversary of the date of grant.

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.