FORM	4

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 Pernonses)

#### 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

Ations *b*. See 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 Siminoff Ellen F		2. Issuer Name and U.S. Auto Parts N			· ·	1		5. Relationship of Reporting Person(s) (Check all applical X Director 10		
(Last) (First) C/O EFFICIENT FRONTIER, INC STREET		3. Date of Earliest Transaction (Month/Day/Year) 06/22/2007							her (specify belo	w)
(Street) MOUNTAIN VIEW, CA 94043		4. If Amendment, Da	ate Original	Filed	(Month/Day	/Year)		6. Individual or Joint/Group Filing(Chee _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		ne)
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acqu						ired, Disposed of, or Beneficially Own	ned	
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	(Instr. 8)		4. Securi (A) or D (Instr. 3,	isposed o	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	1

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

				( <i>e.g.</i> , put	ts, c	alls, war	rant	s, options, conve	rtible securiti	es)					
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numb	er	6. Date Exercisal	ble and	7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	of		Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)		Code		Derivati	ve	(Month/Day/Yea	ır)	Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Securitie	s			Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquire	1			(Instr. 3 and	d 4)			2	(Instr. 4)
	Security					(A) or							0	Direct (D)	
						Dispose	1 of						1	or Indirect	
						(D)							Transaction(s)	< / <	
						(Instr. 3,	4,						(Instr. 4)	(Instr. 4)	
						and 5)	-								
											Amount				
								Date	Expiration		or				
									Date		Number				
				~ .							of				
				Code	V	(A)	(D)				Shares				
Option										~					
(right to	\$ 9.41	06/22/2007		А		20,000		06/22/2008(2)	06/21/2017	Common	20.000	\$ 0	20,000	D	
buy) (1)						,000		00/22/2000		Stock	,000	÷ů	,000		
buy)															

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Siminoff Ellen F C/O EFFICIENT FRONTIER, INC. 555 ELLIS STREET MOUNTAIN VIEW, CA 94043	Х						

## Signatures

/s/ Ellen F. Siminoff	09/24/2007
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.