

# CAPELLA EDUCATION CO

# Reported by RONNEBERG AMY L

## FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 02/25/10 for the Period Ending 02/23/10

Address 225 SOUTH 6TH STREET

9TH FLOOR

MINNEAPOLIS, MN 55402

Telephone (612) 659-5360

CIK 0001104349

Symbol CPLA

SIC Code 8200 - Services-Educational Services

Industry Schools

Sector Services

Fiscal Year 12/31





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

### UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Expires: February 28, 2011 Estimated average burden hours per response... 0.5

#### STATEMENT OF CHANGES IN 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(f) of the Investment Company Act of 1940

| 1. Name and Add                                | ress of Re  | porting l | Person *                                      | 2.                              | Iss   | uer Nam   | ne <b>and</b>     | l Ti          | cker   | or 7            | rad              | ing S              | ymbol   | 5. Relation<br>(Check all                           |   |   | Person(s                              | ) to Issuer |
|--|---|-----------|---|---------------------------------|---|---|-------------------|---------------|--|-----------------|------------------|--------------------|---|---|---|---|---------------------------------------|-------------|
| RONNEBER                                       | G AMY   | L         |   |                                 |   | PELLA<br>PLA]   | ED                | UC            | CAI  | ΓIO             | N (              | СО                 |   | Direct  | or  | _   | 10% C                                 | )wner       |
| (Last)   | (First)   | (Mid      | ldle)   | 3.                              | 3. Date of Earliest Transaction (MM/DD/YYYY)      |   |                   |               |  | X Office below) | cer (give title  | e below)           | Oth   | er (specify   |   |   |                                       |             |
| 225 SOUTH 6TH STREET, 9TH<br>FLOOR             |   |           |   |                                 | 2/23/2010   |   |                   |               |  |                 |                  |                    | Vice President & Controller   |   |   |   |                                       |             |
| (Street)                                       |   |           |   |                                 | 4. If Amendment, Date Original Filed (MM/DD/YYYY) |   |                   |               |  |                 |                  |                    | 6. Individual or Joint/Group Filing (Check Applicable Line)                       |   |   |   |                                       |             |
| MINNEAPOI                                      | LIS, MN   | I 55402   | 2   |                                 | ,   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | ,                 |               |  |                 |                  |                    |   |   |   | Panorting Pa  | rson                                  |             |
| (City)   | (City) (State) (Zip)  |           |   |                                 |   |   |                   |               |  |                 |                  |                    | X_Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |   |                                       |             |
|  |   | Table l   | I - Non-l                                     | Deriv                           | ativ  | ve Secur  | ities A           | Acq           | uire   | ed, I           | )<br>Isp         | osed o             | of, or  | Beneficially  | y Owned   |   |                                       |             |
| 1.Title of Security<br>(Instr. 3)              |   |           |   | 2. Trans.<br>Date               | _   | 2A.<br>Deemed<br>Execution<br>Date, if  | 3. Trans.<br>Code |               | 4. Securities<br>Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4 and 5) |                 |                  | or<br>))           | 5. Am<br>Follov   | ount of Securitie                                   | ant of Securities Beneficially Owned ng Reported Transaction(s)             |   |                                       | ` /         |
|  |   |           |   |                                 |   | any   | Code              | ode V         |  |                 | (A)<br>or<br>(D) | Price              | I I   |   |   | (I) (Instr.   |                                       |             |
| Common stock                                   |   |           |   | 2/23/2                          | 010   |   | М                 |               | 100  | 00              | A S              | \$20.00            |   | 10  | 000   |   | D                                     |             |
| Common stock                                   |   |           |   | 2/23/2                          | 010   |   | s                 | s             |  | 000 D \$8       |                  | 882.50             |   | (   | 0   |   | D                                     |             |
| Common stock                                   |   |           |   |                                 |   |   |                   |               |  |                 |                  |                    | 1645  |   |   | I   | By<br>Retirement<br>Savings<br>Plan   |             |
| Tab  | le II - De  | rivative  | Securiti                                      | es Be                           | nef   | icially C   | )wned             | l ( e         | e.g. ,   | put             | s, ca            | alls, w            | arrai   | nts, options  | , convert   | ible secui  | rities)                               |             |
| 1. Title of Derivate<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | Date      | 3A.<br>Deemed<br>Execution<br>Date, if<br>any | Trans.<br>Code<br>(Instr.<br>8) |   | 5. Number of Derivative Securities Acquired (Approximately Disposed D) Instr. 3, 4 a 5) | Expirate A) I of  |               | Exercisable and tion Date  |                 | Secu<br>Deriv    |                    | nderlying<br>ecurity  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | of 9. Number of derivative Securities Beneficially Owned Following Reported | 10. Ownership Form of Derivative y Security: Direct (D) or Indirect (I) (Instr. | Beneficial<br>Ownership<br>(Instr. 4) |             |
|  |   |           |   | Code                            |   |   | E                 | ate<br>kercis | sable  | Expi<br>Date    | ation            | <sup>1</sup> Title | N   | amount or<br>Jumber of<br>hares                     |   | Transaction (s) (Instr. 4)  | n 4)                                  |             |
| Stock option (right to buy)                    | \$20.00   | 2/23/2010 |   | M                               |   | 1000  |                   | (1            | )  | 10/20           | 6/201            | 5 Com<br>stoo      |   | 1000  | \$0   | 9130  | D                                     |             |

#### **Explanation of Responses:**

(1)Immediately

**Reporting Owners** 

| Reporting 6 where                       |               |           |                             |       |  |  |  |  |  |  |
|---|---------------|-----------|-----------------------------|-------|--|--|--|--|--|--|
| Panarting Owner Name / Address          | Relationships |           |                             |       |  |  |  |  |  |  |
| Reporting Owner Name / Address          | Director      | 10% Owner | Officer                     | Other |  |  |  |  |  |  |
| RONNEBERG AMY L<br>225 SOUTH 6TH STREET |               |           | Vice President & Controller |       |  |  |  |  |  |  |

| MINNEAPOLIS, MN 55402  |           |
|--|-----------|
| Signatures   |           |
| /s/ Kimberly F. Stephan, Attorney-in-Fact for Amy L. Ronneberg | 2/25/2010 |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Signature of Reporting Person

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.