Edgar Filing: SALESFORCE COM INC - Form 4

SALESFOR	CE COM INC											
Form 4												
November 22	2, 2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check thi									Expires:	January 31,		
if no long subject to		EMENT O	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF		2005		
Section 16. SECURITIES								Estimated average burden hours per				
Form 4 or Form 5						_			response	•		
obligatior	• •							ge Act of 1934,				
may conti				•	•	• •		of 1935 or Sectio	on			
See Instru	iction	30(n)) of the Inv	vestment	Compan	y Aci	. 01 19	40				
1(b).												
(Print or Type R	Responses)											
1. Name and A	ddress of Reportin	ng Person *	2 Issuer	Name and	Ticker or '	Fradin	σ	5. Relationship o	f Reporting Per	son(s) to		
HASSENFELD ALAN G Symbol				Name and Ticker or Trading				Issuer				
			-	FORCE C	OM INC	C [CR	RM]			、 、		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check					ck all applicabl	all applicable)			
~ /		× /	(Month/D					X Director 10% Owner				
THE LANDMARK @ ONE 11/22/20				-				Officer (give title Other (specify below)				
MARKET S	TREET, SUIT	ЪЕ 300						below)	Delow)			
(Street) 4. If Amer			ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check					
Filed(Mont							Applicable Line)					
		1105						_X_ Form filed by Form filed by 1				
SAN FRAN	CISCO, CA 94	105						Person		1 0		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction I	Date 2A. De	emed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye	on Date, if	Transactio	•			Securities	Form: Direct	Indirect			
(Instr. 3)		any (Month	CodeDisposed of (D)Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(11101111	(2)u); 10ul)	(1115411-0)	(111547-0)	· uno	2)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	(instr. 5 und 1)				
Common Stock	11/22/2016			А	1,710	А	\$ 0 (1)	139,879	D			
Stock							<u>(-)</u>					
Common Stock								1,350	Ι	By Wife		

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 in this form are not required to respond unless the form displays a currently valid OMB control number.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HASSENFELD ALAN G THE LANDMARK @ ONE MARKET STREET SUITE 300 SAN FRANCISCO, CA 94105	Х					
Signatures						
/s/ Scott Siamas, Attorney-in-Fact for Alan Hassenfeld	11/22/2016					
**Signature of Reporting Person		Date				
Evalenation of Deenenees						

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) Shares awarded from the Issuer's 2013 Equity Incentive Plan for board service.

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.