## Edgar Filing: SALESFORCE COM INC - Form 4

SALESFOR	RCE COM INC											
Form 4												
June 18, 20	10											
FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL					
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box if no longer subject to STATEMENT OF CHANG									Expires:	January 31,		
				NGES IN	GES IN BENEFICIAL OWNERSHIP OF					2005 verage		
Section	Section 16. SECURITIES							burden hou				
Form 4			~ .		~ .				response	0.5		
Form 5 obligation							•	e Act of 1934,				
may cor				•	•	· ·	•	1935 or Section	l			
See Inst	ruction	30(n)	of the fi	nvestmen	t Compar	iy Ac	21 01 194	0				
1(b).												
(Print or Type	Responses)											
1. Name and	Address of Reporting	g Person <sup>*</sup>	2. Issue	suer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
Benioff Ma	arc		Symbol					Issuer				
S			SALES	SFORCE	COM IN	C [C]	RM]	(Check all applicable)				
(Last)	(First) (	(Middle)	3. Date of	of Earliest T	ransaction			(Check an applicable)				
			(Month/	Day/Year)				_X_ Director _X_ 10% Owner				
	DMARK @ ONE		06/18/2	5/18/2010				XOfficer (give titleOther (specify below) below)				
MARKET	STREET, SUITE	E 300						<i>'</i>	of the Board &	CEO		
		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check					
				onth/Day/Yea	-			Applicable Line)				
								_X_Form filed by O				
SAN FRAI	NCISCO, CA 941	05						Form filed by Me Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tał	ole I - Non-I	Derivative	Secui	rities Acq	uired, Disposed of,	or Beneficial	ly Owned		
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securiti	es Ac	quired (A	) 5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if	Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities	Ownership	Indirect		
(Instr. 3)		any (Month/D)	av/Vear)					Beneficially Owned	Form: Direct (D)	Beneficial Ownership		
			ay/ I cai )	(111501.0)				Following	or Indirect	(Instr. 4)		
						(A)		Reported	(I)			
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
~				Code V	Amount	(D)	Price					
Common Stock	06/18/2010(1)			S	10,000	D	\$ 96.001	11,791,006 3 <sup>(2)</sup>	D			

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.

 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)	4. Transactio Code (Instr. 8)	5. 6. Date Exercisable a onNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Under Secur	tle and unt of rrlying rities r. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Repo	rting O	wners	Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

Chairman of the Board & CEO

Officer

## Edgar Filing: SALESFORCE COM INC - Form 4

SAN FRANCISCO, CA 94105	5
Signatures	

**Benioff Marc** 

**SUITE 300** 

/s/ David Schellhase, Attorney-in-Fact for Marc 06/18/2010 Benioff \*\*Signature of Reporting Person

**Explanation of Responses:** 

**Reporting Owner Name / Address** 

THE LANDMARK @ ONE MARKET STREET

- \* 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).

Director

Х

10% Owner

Х

Date

- (1) Acquisition/Disposition of Derivative and/or Non-Derivative securities is pursuant to a 10b5-1 Plan.
- (2) Shares held in The Marc R. Benioff Revocable Trust.

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.

Other