## Edgar Filing: OOMA INC - Form 4

OOMA INC

OOMA INC Form 4											
	April 21, 2016 FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
FURIN	<b>4</b> UNITED ST		SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549				OMMISSION	OMB Number:	3235-0287		
Check thi if no long subject to Section 1 Form 4 or	Ger <b>STATEMI</b> 6. r	ENT OF CHAN	OF CHANGES IN BENEFICIAL OWN SECURITIES					Expires: Estimated a burden hour response	~		
obligation may conti	Form 5 obligations may continue. See Instruction 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(h) of the Investment Company Act of 1940										
(Print or Type R	Responses)										
1. Name and A Gustke Jame	r Name <b>and</b> Ticker or Trading INC [OOMA]				5. Relationship of Reporting Person(s) to Issuer						
(Last)	(First) (Mie		3. Date of Earliest Transaction			(Check	c all applicable)	)			
C/O OOMA EMBARCA	/Day/Year) Director /2016X Officer (give below) Vice Pres				e title 0% Owner below) sident of Marketing						
	endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>						
PALO ALT	O, CA 94303						Person	ore than One Rep	borung		
(City)	(State) (Z	ip) Tab	le I - Non-I	Derivative	Secu	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year)			Code (Instr. 3, 4 and 5)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	or	Price \$	Transaction(s) (Instr. 3 and 4)				
Common Stock	04/20/2016		S <u>(1)</u>	6,000	D	φ 7.2333 (2)	247,074	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration E (Month/Day e	. Date Exercisable and Expiration Date Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code N	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships								
Reporting O when I tunic / I turi cos	Director	10% Owner	Officer	Other					
Gustke James A. C/O OOMA, INC. 1880 EMBARCADERO ROAD PALO ALTO, CA 94303			Vice President of Marketing						
Signatures									
/s/ Spencer D. Jackson, as attorne Gustke	y-in-fact	for James A.	04/20/2016						
<u>**</u> Signature of Reporting	ng 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) Sale effected under sales plan pursuant to Rule 10b5-1(c)(1) of the Securities Exchange Act of 1934, as amended.

The range of prices for the shares of Common Stock is from \$7.12 to \$7.30. The reporting person undertakes that he will provide, upon request by the staff of the U.S. Securities and Exchange Commission, full information regarding the number of securities sold at each separate price.

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.