Edgar Filing: SALESFORCE COM INC - Form 4

| SALESFOR Form 4 February 15, | CE COM INC 2017 | | | | | | | | | | | |
|---|--------------------------------------|-----------|-------------------------|---|------|-------------|------------------|----------------|--|--|---|--|
| FORM | 1 4 | | | | | | | | | | PPROVAL | |
| 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 | | | | GES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | Expires: January 31 2005 Estimated average burden hours per | | |
| Section 16. SECURITIES Form 4 or | | | | | | | | response | rs per 0.5 | | | |
| Form 5 | Filed pu | rsuant to | Section 16 | 6(a) of t | the | Securiti | es Ez | cchang | e Act of 1934, | . copencem | 0.0 | |
| obligatior may conti <i>See</i> Instru 1(b). | inue. Section 17 | | Public Ut of the Inv | • | | • | - · | | f 1935 or Sectio 40 | n | | |
| (Print or Type R | Responses) | | | | | | | | | | | |
| Conway Craig Sym | | | Symbol | 2. Issuer Name and Ticker or Trading Symbol SALESFORCE COM INC [CRM] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | SALESH | | | | | | (Check all applicable) | | | |
| (Last) | (First) | (Middle) | 3. Date of | | Tra | nsaction | | | × | 11 | , | |
| | MARK @ONE TREET, SUITE | | (Month/Da 02/15/20 | - | | | | | _X_ Director Officer (give below) | | Owner er (specify | |
| | (Street) | | 4. If Amer | ndment, I | Date | e Original | | | 6. Individual or Jo | oint/Group Filir | g(Check | |
| SAN FRAN | CISCO, CA 941 | 105 | Filed(Mon | th/Day/Ye | ear) | | | | • | One Reporting Pe fore than One Re | | |
| | | | | | | | | | Person | | | |
| (City) | (State) | (Zip) | Table | e I - Non | -De | erivative S | Securi | ties Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year | any | | | | | | d of | Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock | 02/15/2017 | | | S <u>(1)</u> | | 250 | D | \$ 81.2 | 8,993 | 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. Transact Code (Instr. 8) | 5. ionNumber of) Derivative Securities Acquired (A) or Disposed | | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans |
|---|---|---|--------------------------------------|---|---------------------|--------------------|---|--|---|---|
| | | | | of (D) (Instr. 3, 4, and 5) | | | | | | (Instr |
| | | | Code N | 4, and 5) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| | Relationships | | | | | |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| Conway Craig THE LANDMARK @ONE MARKET STREET SUITE 300 SAN FRANCISCO, CA 94105 | X | | | | | |
| Signatures | | | | | | |
| /s/ Scott Siamas, Attorney-in-Fact for Craig Conway | 02 | 2/15/2017 | | | | |
| **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) Pursuant to a 10b5-1 Plan.

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.