## Edgar Filing: OOMA INC - Form 4

OOMA INC

Form 4	0017										
February 15, <b>FORM</b>	ГЛ									PPROVAL	
-	UNITE	D STATE			ND EXC D.C. 205		IGE (	COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 or	G. STAT	ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES						NERSHIP OF	Lanuary 31Expires:2005Estimated averageburden hours perresponse0.5		
Form 5 obligation may conti <i>See</i> Instru 1(b).	inue. Section	17(a) of the		ility Hold	ling Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40			
(Print or Type R	Responses)										
1. Name and Address of Reporting Person *2. IssuGustke James A.Symbol				Issuer Name <b>and</b> Ticker or Trading 1bol				5. Relationship of Reporting Person(s) to Issuer			
			OOMA	INC [OO	MA]			(Check all applicable)			
(			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 02/13/2017					Director 10% Owner X Officer (give title Other (specify below) below) Vice President of Marketing		
	(Street)			ndment, Da hth/Day/Year	-			6. Individual or Jo Applicable Line) _X_ Form filed by 0	-	-	
PALO ALT	O, CA 94303							Form filed by M Person	Nore than One Re	eporting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecurit	ies Acc	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Ye	ear) Execut any	emed ion Date, if n/Day/Year)	3. Transactio Code (Instr. 8) Code V	4. Securiti on(A) or Dis (D) (Instr. 3, 4 Amount	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock (1)	02/15/2017			А	32,000	А	\$0	214,327	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I 2 ()
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (right to buy)	\$ 10.2	02/13/2017		А	8,000	(2)	02/13/2027	Common Stock	8,000	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	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 attorney-in-fact for James A. Gustke			02/15/2017				
**Signature of Reporti	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).

Represent restricted stock units which will vest as follows: 1/8th of the total original number of restricted stock units shall vest on(1) September 15, 2017 and 1/16th of the total original number of restricted stock units shall vest on the same day of every third month thereafter.

(2) 1/8th of the shares subject to the option will vest and become exercisable on September 15, 2017 and 1/16th of the shares subject to the option shall vest and become exercisable on the same day of every third month thereafter.

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.

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