### Edgar Filing: KROES NEELIE - Form 4

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KROES NE	ELIE										
Form 4											
May 22, 201	8										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
<b>CUNIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287	
Check th							Expires:	January 31,			
subject to statement of changes in BENEFICIAL OWNERSHIP						<b>VERSHIP OF</b>	Estimated a	2005			
-	Section 16.				ITIES				burden hours per		
Form 4 o									response	. 0.5	
Form 5 obligatio	<b>n</b> o <b>-</b>						-	e Act of 1934,			
may cont				•	•	· ·	•	1935 or Section	1		
See Instr		30(h) of	f the Inve	estment	Compar	iy Ac	ct of 194	0			
1(b).											
(Print or Type I	Responses)										
(	F)										
1. Name and A	Address of Reporting	Person <sup>*</sup>	2. Issuer N	lame and	l Ticker or	Tradi	ng	5. Relationship of	Reporting Person(s) to		
KROES NEELIE Symb				-				Issuer			
	S	SALESFORCE COM INC [CRM]				RM]	(Chaok all applicable)				
(Last)						(Check all applicable)					
	× / ×	, -		onth/Day/Year)				_X_ Director 10% Owner			
THE LAND	MARK @ONE		5/22/201	-				Officer (give title Other (specify			
MARKET STREET								below) below)			
	(Street)	4	. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
				(Month/Day/Year)				Applicable Line)			
_X_ Form filed by One Reporting Person											
SAN FRANCISCO, CA 94105 Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Table I	I - Non-D	Derivative	Secui	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date	2A. Deemed	1 3		4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution D		Transaction(A) or Disposed of (D)				Securities	1	Indirect	
(Instr. 3)		any (Month/Day	Code (Instr. 3, 4 and 5) (Year) (Instr. 8)				5)	Beneficially Owned	Form: Direct Benefic (D) or Owners	Beneficial Ownership	
		(Month/Day	/ i cui ) (i			Following			Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s)			
			C	Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	05/22/2018			А	1,033	А	\$ 0 <u>(1)</u>	8,275	D		
Stock					-,						
Common	05/22/2010			Б	200 (2)	D	\$	7.066	D		
Stock	05/22/2018			F	309 <u>(2)</u>	D	125.44	7,966	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.

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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)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	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		
KROES NEELIE THE LANDMARK @ONE MARKET STREET SAN FRANCISCO, CA 94105	Х					
Signatures						
/s/ Scott Siamas, Attorney-in-Fact for Neelie Kroes	05/2	22/2018				
**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) Shares awarded from the Issuer's 2013 Equity Incentive Plan for board service.
- (2) Shares withheld to satisfy the reporting person's tax liability in connection with the issuance of common stock pursuant to the award reported in row 1 above.

#### **Remarks:**

Exhibit 24 - Power of Attorney

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.