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| BLOCK KE Form 4 May 23, 20 | 18 | | | | | | | | | | |
|---|--|--|---|--|--------------|---|----------------|--|--|---|--|
| FORN Check ti if no lor subject Section Form 4 | his box ^{nger} STATE 16. | Washington, D.C. 20549 | | | | | | | OMB APPROVAL OMB 3235-0287 Number: January 31, Expires: 2005 Estimated average burden hours per response 0.5 | | |
| Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations may continue. See Instruction 1(b). (Print or Type Responses) | | | | | | | | | | | |
| 1. Name and BLOCK K | Symbol | 2. Issuer Name and Ticker or Trading Symbol SALESFORCE COM INC [CRM] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| (Last) (First) (Middle) THE LANDMARK AT ONE MARKET, SUITE 300 | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/22/2018 | | | | | X_ Director 10% Owner X_ Officer (give title Other (specify below) below) Vice Chairman, Pres. and COO | | | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| SAN FRAI | NCISCO, CA 941 | 105 | | | | | | Person | në than One Rej | Jorning | |
| (City) | (State) | (Zip) | Tal | ole I - Non- | Derivativ | e Secu | urities Acqu | ired, Disposed of, | or Beneficiall | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Date, if | Code (Instr. 3, 4 and 5) r) (Instr. 8) (A) or | | | (D) 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 05/22/2018 | | | M | Amount 2,068 | (D) A | Price \$ 0 | 21,686 | D | | |
| Common Stock | 05/23/2018 | | | S | 1,039 | D | \$ 125.9549 | 20,647 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. Number onof 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 o Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|---------------------------------------|---|--|--------------------|--|--------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amoun or Numbe of Shares |
| Restricted Stock Units | \$ 0 <u>(1)</u> | 05/22/2018 | | М | 2,068 | 11/22/2017 <u>(2)</u> | 11/22/2020 | Common Stock | 2,068 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|------------|------------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| BLOCK KEITH THE LANDMARK AT ONE MARKET SUITE 300 SAN FRANCISCO, CA 94105 | X | | Vice Chairman, Pres. and COO | | | | |
| Signatures | | | | | | | |
| /s/ Lisa Yun, Attorney-in-Fact for Keith Block | | 05/23/2018 | | | | | |
| **Signature of Reporting Person | | Date | | | | | |
| Explanation of Respons | es: | | | | | | |
| | | | | | | | |

- * 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) Restricted Stock Units convert to shares of common stock on a one-for-one basis.
- (2) These restricted stock units vested as to 25% of the original grant on November 22, 2017 and vest as to 1/16 of the original grant quarterly 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.