Edgar Filing: MODEL N, INC. - Form 4

MODEL N, Il Form 4	NC.											
February 22, 2	2016											
									OMB APPROVAL			
	Washington, D.C. 20549							OMB Number:	3235-0287			
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	er STAT 5. Filed p s Section 1	oursuant to S 7(a) of the 1	Section 16 Public Ut	CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES ection 16(a) of the Securities Exchange Act of 1934, ublic Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940						January 31, 2005 average rs per 0.5		
(Print or Type Ro	esponses)											
1. Name and Address of Reporting Person <u>*</u> Tisdel Mark			2. Issuer Name and Ticker or Trading Symbol MODEL N, INC. [MODN]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)		Earliest Tra	-	1		(Chec	ck all applicable	e)		
C/O MODEI	L N, INC., 16 OULEVARI	00	(Month/D) 02/18/20	ay/Year)	insaction			Director X Officer (give below) SVP & Ch		Owner er (specify officer		
	(Street) 4. If Amendment, Filed(Month/Day/Y				Pay/Year) App				5. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person			
REDWOOD	CITY, CA 94	4063						Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	med n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V		4 and (A) or	d 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	02/18/2016			S <u>(1)</u>	1,560	D	\$ 9.92	223,761	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	2.	3. Transaction Date		4. T	5.	6. Date Exerc		7. Title a		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	,	Transactio		Expiration D		Amount		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	-	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Owne
	Security				Acquired						Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(inoti
					(insu: 5, 4, and 5)						
					4, alla 3)						
								А	mount		
								01	r		
						Date	Expiration		lumber		
						Exercisable	Date	of			
				Code V	(A) (D)				hares		
				Coue v	(A) (D)			3	nares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Tisdel Mark C/O MODEL N, INC. 1600 SEAPORT BOULEVARD, SUITE 400 REDWOOD CITY, CA 94063			SVP & Chief Financial Officer				
Signatures							
/s/ Mark Tisdel by Errol Hunter, Attorney-in-Fact	(02/22/2016					
**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).

All of the shares reported as disposed of in this Form 4 were sold by the Reporting Person in order to pay the federal and state tax
 (1) withholding obligations resulting from the vesting of the Reporting Person's Restricted Stock Units ("RSUs"). The Reporting Person did not sell or otherwise dispose of any of the shares reported on this Form 4 for any reason other than to cover required taxes.

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.