## Edgar Filing: SALESFORCE COM INC - Form 4

SALESFOR	RCE COM INC									
Form 4										
November 2										
FORM	$\mathbf{\Lambda} 4_{\text{UNITED}}$	CT A TEC	SECU	DITIES				Т	PPROVAL	
	UNITED	SIAIES			, D.C. 20			Number:	3235-0287	
Check this box								Expires:	January 31,	
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI								· ·	2005	
Section				SECUI			Estimated average burden hours per			
Form 4	or			response	•					
Form 5							nge Act of 1934,			
obligati may cor				•	•	• •	of 1935 or Section	on		
See Inst		30(h)	of the I	nvestmen	t Compan	y Act of 1	940			
1(b).										
(Print or Type	(Responses)									
1 Name and	Address of Penorting	Derson *	<b>.</b> .	N	1 (7) 1	<b>T</b> 1'	5 Pelationshin	of Deporting De	con(s) to	
Benioff Marc Symbol				Loop			Issuer	5. Relationship of Reporting Person(s) to Issuer		
				1001						
			SALE	LESFORCE COM INC [CRM]			(Che	eck all applicabl	all applicable)	
(Last)	(First) (	Middle)		of Earliest T	ransaction					
THE LAND				onth/Day/Year)			X_ Director 10% Owner X_ Officer (give title Other (specify			
THE LANDMARK @ ONE 11/25/2 MARKET STREET, SUITE 300			5/2014			below)	below)			
MAKKEI	STREET, SUITE	, 300					Chairman	n of the Board &	k CEO	
(Street) 4. If Am				Amendment, Date Original (Month/Day/Year)			6. Individual or Joint/Group Filing(Check			
			Applicable Line)							
							_X_ Form filed by			
SAN FRA	NCISCO, CA 941	05					Person	More than One R	eporting	
(City)	(State)	(Zip)	<b>T</b> 1		<b>.</b>	~ • • •		6 D C .		
							cquired, Disposed	oi, or Beneficia	-	
1.Title of	2. Transaction Date			3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)		5. Amount of	6. Ownership	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)					Securities Beneficially	Form: Direct (D) or Indirect	Indirect Beneficial		
(IIIsu. <i>5)</i>				(Instr. 8) (Instr. 3, 4 and 5)			Owned	(I)	Ownership	
		(	J)	(			Following	(Instr. 4)	(Instr. 4)	
						(A)	Reported			
						or	Transaction(s)			
				Code V	Amount	(D) Price	(Instr. 3 and 4)			

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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) Disposed of (I (Instr. 3, 4, an	D)			
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title
Non-qualified Stock Option (Right to Buy)	\$ 59.34	11/25/2014		А		1,966,358		11/25/2015 <u>(1)</u>	11/25/2021	Common Stock

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships							
Reporting Owner Funct / Hunciss	Director	10% Owner	Officer	Other					
Benioff Marc THE LANDMARK @ ONE MARKET STREET SUITE 300 SAN FRANCISCO, CA 94105	х		Chairman of the Board & CEO						
Signatures									
/s/ Sarah Dods, Attorney-in-Fact for Marc Benioff	11/2	5/2014							
**Signature of Reporting Person	Ι	Date							
<b>Signatures</b> /s/ Sarah Dods, Attorney-in-Fact for Marc Benioff									

## **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) Option vests over four years at the rate of 25% on November 25, 2015, the first anniversary of the holder's date of grant, with the balance vesting in equal monthly installments over the remaining 36 months.

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.