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RingCentral Inc											
Form 4											
May 20, 2014	I							OMB A	APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington D.C. 20549							3235-0287				
Check this box Washington, D.C. 20549						Expires:	January 31,				
				NGES IN SECUR		ICIAL OV	WNERSHIP OF	Estimated burden ho	urs per		
Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	Section 17((a) of the	Public U	tility Hole	ding Con		nge Act of 1934, of 1935 or Secti 940		0.5		
(Print or Type Respo	onses)										
1. Name and Address of Reporting Person <u>*</u> THEIS ROBERT I			2. Issuer Name and Ticker or Trading Symbol			Trading	5. Relationship of Reporting Person(s) to Issuer				
			RingCentral Inc [RNG]				(Check all applicable)				
(Last) C/O SCALE VE PARTNERS, 95 SUITE 700	ENTURE	Middle)		of Earliest Tr Day/Year) 2014	ransaction		X Director Officer (giv below)		% Owner her (specify		
	(Street)		4. If Amendment, Date Original			1	6. Individual or Joint/Group Filing(Check				
FOSTER CITY,	CA 94404		Filed(Mo	onth/Day/Year	r)		Applicable Line) _X_ Form filed by Form filed by Person	One Reporting F More than One F			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned		
	ansaction Date hth/Day/Year)	Execution any	Date, if	3. Transaction Code (Instr. 8)	Disposed	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(D) Price	(Instr. 3 and 4)				
Reminder: Report or	n a separate line	e for each cl	lass of sec	urities benef	ficially own	ned directly o	or indirectly.				
					inforn requir	nation cont ed to respo ys a currer	pond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					posed of, or convertible s	Beneficially Owner securities)	1			
1. Title of 2.	3. Trans	saction Date	e 3A. Dee	emed	4.	5. Number	of 6. Date Exerci	sable and	7. Title and Amount of		

Derivative Conversion (Month/Day/Year) Execution Date, if TransactionDerivative

Underlying Securities D

Expiration Date

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (· ·	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 12.3	05/16/2014		A	38,209		<u>(1)</u>	05/15/2021	Class A Common Stock	38,209

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
THEIS ROBERT I C/O SCALE VENTURE PARTNERS 950 TOWER LANE, SUITE 700 FOSTER CITY, CA 94404	x							
Signatures								
/s/ Robert Theis 05/20/20	14							

<u>**</u>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) One-twelfth (1/12th) of the shares subject to the option vest on 6/16/14 and 1/12th will vest on the 16th day of each month thereafter for the following 11 months.

Pursuant to the policies of Scale Venture Partners III, LP ("Scale Partners") and Scale Management III, LLC ("Scale Management III") and Scale Management LLC ("Scale Management") the Reporting Person is deemed to hold the reported option for the benefit of Scale

(2) Management, and must exercise the option solely at the direction of Scale Partners and Scale Management III. Scale Management may be deemed the indirect beneficial owner of the option. The Reporting Person disclaims beneficial ownership of the option except to the extent of his pecuniary interest therein.

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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