FORM 4

1. Name and Address of Reporting Person*

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| | | | | | | | | |

5. Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

| OND 74 TT | (O V/ (L | | | | | | |
|--------------------------|----------|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |
| | | | | | | | |

| Verma Vikram | | | | | 8X8 INC /DE/ [EGHT] | | | | | | | | | | I | all applicable) Director Officer (give title | | 10% C | wner (specify |
|---|--|--|--------------------------|-------|---|---|--------|--------------------------------------|--|---|--------------------|---|-------------|---|--|---|---|--|--|
| (Last) (First) (Middle) 2125 O'NEL DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/19/2016 | | | | | | | | | | | below) below) Chief Executive Officer | | | |
| (Street) SAN JOS (City) | | | 25131 Zip) | | 4. If | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | ne) X | Form filed by More than One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) | | | Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Disposed Code (Instr. 5) | | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | | nd Se Be | Amount of curities neficially vned Followi | F | i. Ownership form: Direct D) or Indirect I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) Pi | | Price | , Tr | Transaction(s) (Instr. 3 and 4) | | | (IIISti. 4) |
| Common Stock | | | | 01/19 | 9/2016 | | | | A | | 5,1020 | (1) | A | \$ | 0 | 251,550 | | D | |
| Common Stock | | | | 01/19 | 01/19/2016 | | | | F | | 2,233(1) | | D | \$0 | | 249,317 | | D | |
| | 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) | /e Conversion Date Execution Date or Exercise (Month/Day/Year) if any | | | Date, | 4. Transaction Code (Instr. 8) | | n of i | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | ount | 8. Price Derivat Securit (Instr. § | ve derivativ Securitie | ive ies cially ng ed ction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title Shares | | | | | | | |

Explanation of Responses:

1. In lieu of his full quarterly cash compensation payment, Mr. Verma elected to receive a portion of his MIP bonus in the form of RSUs based on the terms of his employment agreement as 8x8's Chief Executive Officer. Effective January 19, 2016, the Company's Board of Directors approved the issuance of 5,102 fully vested restricted stock units subject to settlement in shares of Common Stock as part of Mr. Verma's Q3 MIP bonus

> /s/ Vikram Verma 01/21/2016

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.