FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| wasinington, | D.C. | 20343 | |
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| OMR APP | ROVAL |
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| OMB Number | 3235-02 |

| Check this box if no longer subject to |
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| 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

| OMB APPROVAL | | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: 0.5 | | | | | | | | | |

| 1. Name and Address of Reporting Person* MARTIN BRYAN R | | | | 2. Issuer Name and Ticker or Trading Symbol 8X8 INC /DE/ [EGHT] | | | | | | (Ch | elationship c eck all applic Directo | able) | Perso | on(s) to Issu 10% Ov Other (s | /ner | | | |
|--|--|---|-----------------------|--|-------------------------------------|--|--|---|--|--|--|---|--------|--|---------------------------------------|---|---|--|
| (Last) (First) (Middle) C/O 8X8, INC 2125 O'NEL DRIVE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/17/2019 | | | | | | | X Office (give title below) below) Chief Technology Officer | | | | | | | |
| (Street) SAN JOSE CA 95131 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | |
| (City) | (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) Table II - Derivati | | | | Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) Transaction Code (Instr. 8) Disposed Of (D) (Instr. 3, 7) Disposed Of | | | d (A) or r. 3, 4 and Price | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Form | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | ate Execution Date, T | | ansaction of ode (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title an of Securit Underlyin Derivative (Instr. 3 ar | d Amount ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | | |
| | | Code V (A) (D) Exercisable Expiration Date Title Shares | | | | | | | | | | | | | | | | |
| Restricted Stock Units | (1) | 09/17/2019 | | | A | | 10,377 | | 09/17/2020 ⁽²⁾ | 09/ | /17/2022 | Common Stock | 10,377 | \$0 | 10,377 | 7 | D | |

Explanation of Responses:

- 1. Right to receive one or more shares of EGHT common stock.
- 2. RSUs shall vest with respect to one-third (33.3%) of the total number of underlying shares on the first anniversary of the Vesting Commencement Date, then eight and one-third percent (8.33%) vesting each quarter thereafter, over a period of eight quarters, subject to the participant's continued employment or other association with the Company.

Remarks:

Sheryl Andersen, Attorney-in-Fact for Bryan R. Martin

09/19/2019

** 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.