FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| C. 20549 |
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| STATEMENT OF CH | ANGES IN BENEF | ICIAL OWNERSHIP |
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person* Severin Debbie Jo | | | | | 2. Issuer Name and Ticker or Trading Symbol 8X8 INC /DE/ [EGHT] | | | | | | | | | | | all app | p of Reportir blicable) ctor er (give title | ng Per | 10% C | | | |
|---|---|--------------------|--|-----------|---|---|---|--------|-------------------------------------|--------|--|---|---------------|-------------------|---|---------|---|---|--|----|--|--|
| (Last) C/O 8X8 | (Fi , INC. IEL DRIVE | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/30/2012 | | | | | | | | | | | w) ``Chief Mark | ceting | below) | | | |
| (Street) SAN JOS (City) | SE CA | A 9 | 75131 Zip) | | 4. If | Ame | endment, | Date o | f Original | Filed | (Month/Da | ay/Ye | ar) | | . Indiv ine) X | Form | r Joint/Group n filed by On n filed by Mo on | e Rep | orting Pers | on | | |
| | | Tabl | e I - Non | -Deriv | ative | Se | curitie | s Acc | quired, | Dis | posed o | f, oı | r Ben | eficia | ally | Owne | ed | | | | | |
| Date | | | | Date | th/Day/Year) i | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispose Code (Instr. 5) | | rities Acquired (A ed Of (D) (Instr. 3, | | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | | Transa | action(s) 3 and 4) | n(s) | | | | |
| Stock Pur | chase Righ | ts | | 09/30 | 0/2012 | 2 | | | F ⁽¹⁾ | | 764 | | D | \$ 6 . | 56 | 15 | 58,730 | 8,730 D | | | | |
| | | Та | ble II - D. (e | | | | | | , | | sed of, onvertib | | | | y Ov | vned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | e (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | n Date, T | 4. Transactio Code (Instr 8) | | | | 6. Date E: Expiratio (Month/D | n Date | 9 | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | ount nber | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

1. Payment of tax liability by withholding securities incident to vesting of stock purchase rights.

/s/ Debbie Jo Severin

10/02/2012

** 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.