Edgar Filing: FOLETTA MARK G - Form 4

FOLETTA M	IARK G										
Form 4	_										
June 04, 2018									OMB AF	PROVAL	
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287	
Check this if no long subject to Section 16 Form 4 or	er STATEM 6.									Expires: January 31 2009 Estimated average burden hours per response 0.9	
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 17(a	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> FOLETTA MARK G			2. Issuer Name and Ticker or Trading Symbol DEXCOM INC [DXCM]				ng	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	(iddle)	3. Date of Earliest Transaction (Chec					ek all applicable)			
(Mor			(Month/D	Month/Day/Year) 5/31/2018				X_ Director 10% Owner Officer (give title Other (specify below) below)			
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
SAN DIEGO	D, CA 92121							Person	lore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deemed onth/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock (1)	05/31/2018			Code V A	Amount 4,062 (2)	(D) A	Price \$ 0.001	(Instr. 3 and 4) 9,014 (3)	D		
Common Stock					<u> </u>		0.001	13,143	I	by Trust (4)	

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
FOLETTA MARK G 6340 SEQUENCE DRIVE SAN DIEGO, CA 92121	Х						
Signatures							
By: Kevin Sun For: Mark G.		0.610.410.04					

Foletta

**Signature of Reporting Person

06/04/2018

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) Each share is represented by a restricted stock unit (RSU) that represents a contingent right to receive one share of DexCom, Inc. common stock upon settlement.
- (2) The RSU Award was granted on May 31, 2018 and 100% of the RSU will vest on the earlier of the one year anniversary of the grant date or the date of DexCom Inc's 2019 Annual Meeting.
- Represents 9,014 restricted stock units, 4,952 of which were granted on June 1, 2017 and shall vest on June 1, 2018 and 4,062 of which(3) were granted on May 31, 2018 and will vest on the earlier of the one year anniversary of the grant date or the date of DexCom Inc's 2019 Annual Meeting.
- (4) Shares are held by the Mark G. and Mary E. Foletta, TTEE's for the Foletta Family Trust DTD 1/30/15, with respect to which the reporting person is a trustee.

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.