## Edgar Filing: BURLINGAME HAROLD W - Form 4

BURLINGA Form 4	ME HAROLD	W										
December 0	2. 2011											
										PROVAL		
Washington, D.C. 20549       N         Check this box       if no longer         subject to       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF         Section 16.       SECURITIES								OMMISSION	OMB Number:	3235-0287		
								Expires: January 3 20 Estimated average burden hours per response 0				
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> BURLINGAME HAROLD W				er Name <b>an</b> stone Onl			-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
		(Middle) JITE 620		of Earliest T Day/Year) 2011	ransaction			_X_ Director		Owner		
								<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
5711117111	0111071, 011 704	04						Person				
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secur	rities Acq	uired, Disposed of,	or Beneficial	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr. 8)	(Instr. 3, 4	ed of ( 4 and 5 (A) or	D) 5)	) 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	12/01/2011			Code V S	Amount 35,000	(D) D	Price \$ 16.255	58 250	D			

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

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 control number.

 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	of			7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
BURLINGAME HAROLD W C/O CORNERSTONE ONDEMAND, INC. 1601 CLOVERFIELD BLVD. SUITE 620 SO SANTA MONICA, CA 90404	UTH	X						
Signatures								
/s/ Adam J. Weiss, by power of attorney	12/02/2	2011						
**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).

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.