## Edgar Filing: Anderson, Mark, Albert - Form 4

Anderson, M	ark, Albert											
Form 4												
July 25, 2017	1											
FORM	1								OMB APPROVAL			
FORM 4 UNITED STATES S				SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287		
Check this							Expires:	January 31,				
if no long subject to	F CHANGES IN BENEFICIAL OWN SECURITIES				NERSHIP OF	Estimated a						
Form 4 or	Section 16.				SECORITIES				burden hou			
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of Section 17(a) of the Public Utility Holding Company Act of 1935 of 30(h) of the Investment Company Act of 1940						1935 or Section	response	0.5				
(Print or Type R	desponses)											
1. Name and Address of Reporting Person <u>*</u> Anderson, Mark, Albert			2. Issuer Name <b>and</b> Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer						
,	•	Symbol MODEL N, INC. [MODN]										
			MODEL N, INC. [MODN]					(Chec	2)			
(Last)	(First)	(Middle)		Earliest Tra	ansaction					-		
C/O MODEL N, INC.,1600 SEAPORT BOULEVARD, SUITE 400, PACIFIC SHORES CENTER - BLD.6			(Month/Day/Year) 05/15/2017					Director 10% Owner X Officer (give title Other (specify below) below) SVP, Global Services				
	(Street)		4 If Ame	ndment Da	te Origina	1		6 Individual or Io	int/Group Filir	r (Chaolr		
	4. If Amendment, Date Original Filed(Month/Day/Year)					<ul><li>6. Individual or Joint/Group Filing(Check</li><li>Applicable Line)</li><li>_X_ Form filed by One Reporting Person</li></ul>						
REDWOOD	CITY, CA 94	4063						Form filed by M Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any		3. Transactio Code (Instr. 8) Code V	(Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	05/15/2017			S <u>(1)</u>	1,844	D	\$ 12.13	102,512	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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
r g a a a a a a a	Director	10% Owner	Officer	Other		
Anderson, Mark, Albert C/O MODEL N, INC.,1600 SEAPORT BOULEVARD SUITE 400, PACIFIC SHORES CENTER - BLD.6 REDWOOD CITY, CA 94063			SVP, Global Services			
Signatures						
/s/Mark Anderson by Errol Hunter, Attorney-in-Fact	07/25/2017					
**Signature of Reporting Person	Date					
Evaluation of Boononcool						

## **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).
- All of the shares reported as disposed of in this Form 4 were sold by the Reporting Person in order to pay the federal and state tax
   (1) withholding obligations resulting from the vesting of the Reporting Person's Restricted Stock Units ("RSUs"). The Reporting Person did not sell or otherwise dispose of any of the shares reported on this Form 4 for any reason other than to cover required taxes.

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.