

FOLETTA MARK G  
Form 4  
June 04, 2018

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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 Responses)

1. Name and Address of Reporting Person \*  
FOLETTA MARK G

2. Issuer Name and Ticker or Trading Symbol  
DEXCOM INC [DXCM]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
6340 SEQUENCE DRIVE  
(Street)

3. Date of Earliest Transaction (Month/Day/Year)  
05/31/2018

Director  10% Owner  
 Officer (give title below)  Other (specify below)

SAN DIEGO, CA 92121  
(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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 Ownership (Instr. 4)
			Code	V	Amount (A) or (D) Price		
Common Stock <sup>(1)</sup>	05/31/2018		A		4,062 <sup>(2)</sup> \$ 0.001	9,014 <sup>(3)</sup>	D
Common Stock						13,143	I by Trust <sup>(4)</sup>

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

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SEC 1474 (9-02)

**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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
							Title	Amount or Number of Shares	
					Code	V	(A)	(D)	

**Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
FOLETTA MARK G 6340 SEQUENCE DRIVE SAN DIEGO, CA 92121		X		

**Signatures**

By: Kevin Sun For: Mark G. Foletta  
Date: 06/04/2018  
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).
- (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 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.
- (3) 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.