

### **EXTREME NETWORKS INC**

# Reported by SHOEMAKER JOHN C

#### FORM 4

(Statement of Changes in Beneficial Ownership)

#### Filed 05/10/17 for the Period Ending 05/08/17

Address 6480 VIA DEL ORO

SAN JOSE, CA 95119

Telephone 408-579-2800

CIK 0001078271

Symbol EXTR

SIC Code 3576 - Computer Communications Equipment

Industry Communications & Networking

Sector Technology

Fiscal Year 06/30



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

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

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person *					2. ]	2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer				
Shoemaker John C					E	XT	REM	E NETV	VOR	RKS	INC	CII	(Check all applicable)					
											•	X Director10% Owner						
(Last) (First) (Middle)				J	3. Date of Earliest Transaction (MM/DD/YYYY)								Officer (give title below) Other (specify below)					
6480 VIA D	EL ORO	)						5/	8/20	17								
(Street)				4. ]	If A	mendn	nent, Date	Origir	nal Fi	iled (1	MM/D	6. Individual or Joint/Group Filing (Check Applicable Line)						
CAN IOSE	CA 0511	0																
SAN JOSE, CA 95119 (City) (State) (Zip)												X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
((	nty) (St	ate) (Z	ıp)															
			Table !	I - No	n-Dei	iva	tive Se	curities A	cquir	ed, E	Dispos	sed o	of, or Be	neficially Own	ed			
1.Title of Security 2. Trans. I				s. Date		Deemed	3. Trans. C						5. Amount of Securities Beneficially Owned Following Reported Transaction(s)				7. Nature	
(Instr. 3)					cution e, if any	(Instr. 8)						Instr. 3 and 4)	Form: Ben	of Indirect Beneficial				
																Ownership (Instr. 4)		
						Code	v	Amo		(A) or (D)	Price				(I) (Instr. 4)			
Common Stock 5/8/201'				017	5/8/2017		M	Ť	1500		A	\$3.02	220748		<b>D</b>			
Common Stock 5/8/2017				017	5/8/2017		M		1500	00	A	\$3.87	235748		D			
Common Stock 5/8/201				017	5/8/2017		M		2500	00	A	\$4.25	260748		D			
	1		<del>,                                      </del>			Ben		•	`					options, conve			1	1
Title of Derivate Security	2. Conversion	3. Trans. Date	3A. Deen Executio		Trans.			ber of ive Securities			ercisable and Date		<ol><li>Title and Securities !</li></ol>			<ol><li>Number of derivative</li></ol>	10. Ownership	<ol> <li>Nature of Indirect</li> </ol>
(Instr. 3)	or Exercise Price of Derivative		Date, if a		nstr. 8)			ed (A) or ed of (D)					Derivative (Instr. 3 an	Security Security		Securities Beneficially Owned	Form of Derivative Security:	Beneficial Ownership
								5, 4 and 5)					(msu. 3 an					(Instr. 4)
	Security					de V			Date		Expiration			Amount or		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect	
					Code		(A)	(D)	Exerci	Exercisable I			Title	Number of Shares			(I) (Instr. 4)	
Non-Qualified Stock Option (right to buy)	\$3.02	5/8/2017	5/8/201	17	M			15000	12/15/	2011	12/15/	/2017	Common Stock	15000	\$0.0	0	D	
Non-Qualified Stock Option (right to buy)	\$3.87	5/8/2017	5/8/201	2017 M				15000	12/6/2	008	008 12/6/20		Common Stock	15000	\$0.0	0	D	
Non-Qualified Stock Option (right to buy)	\$4.25	5/8/2017	5/8/201	5/8/2017 M				25000	10/26/	10/26/		/2017	Common Stock	25000	\$0.0	0	D	

#### **Explanation of Responses:**

**Reporting Owners** 

reporting Owners							
Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director 10% Owner Office		Officer	Other			
Shoemaker John C							
6480 VIA DEL ORO	X						
SAN JOSE, CA 95119							

#### **Signatures**

Quentin Wright, Power of Attorney

\*\*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 control number.