Edgar Filing: Wallack Perry A. - Form 4

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Form 4 August 22, 2	•										
FORM	14								OMB AF	PROVAL	
	UNITE	D STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o	6. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires:January 31 2005Estimated average burden hours per response0.5		
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 1	7(a) of the	Public U		ling Com	ipany	Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Wallack Perry A.			2. Issuer Name and Ticker or Trading Symbol Cornerstone OnDemand Inc [CSOD]					5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) C/O CORNERSTONE ONDEMAND, INC., 1601 CLOVEFIELD BLVD., SUITE 620 SOUTH			3. Date of Earliest Transaction (Month/Day/Year) 08/22/2012					(Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer			
F				4. If Amendment, Date Original Filed(Month/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 			
SANTA MO	ONICA, CA 90	404						Person		8	
(City)	(State)	(Zip)	Tabl	le I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any		3. Transactic Code (Instr. 8) Code V	4. Securiti on(A) or Dis (Instr. 3, 4) Amount	sposed	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	08/22/2012			S	10,000	D	\$ 26.27	697,876	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)

Reporting Owners

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1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						Ì
					4, and 5)						
					· · ·						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Excretisuole Date	of				
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Wallack Perry A. C/O CORNERSTONE ONDEMAND, INC. 1601 CLOVEFIELD BLVD., SUITE 620 SO SANTA MONICA, CA 90404	UTH		Chief Financial Officer					
Signatures								
/s/ Adam J. Weiss, by power of attorney	08/22/2012							
<u>**</u> Signature of Reporting Person	Date							
Explanation of Response	s:							

* 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.