Edgar Filing: Blow Marla J - Form 4

Form 4											
October 01, FORN		STATES					NGE C	OMMISSION	OMB AF	PROVAL	
Check th	is how		Was	shington,	D.C. 20	549			Number:	3235-0287	
if no long subject to Section 1 Form 4 o	ger STATEN 6. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires:January 31, 2005Estimated averageburden hours per response0.5		
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(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									
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Blow Marla J			2. Issuer Name and Ticker or Trading Symbol Care.com Inc [CRCM]				ng	5. Relationship of Reporting Person(s) to Issuer			
				-	-			(Checl	k all applicable	;)	
	(First) (COM, INC., 77 VENUE, 5TH F	Middle) LOOR	3. Date of (Month/D 09/30/20	-	ansaction			X Director Officer (give below)		Owner er (specify	
			endment, Date Original nth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
WALTHAN	И, MA 02451							Form filed by C Form filed by M Person			
(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 Dat (Month/Day/Year)	Executio any	med n Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock, \$0.001 par value	09/30/2018			Code V A	Amount 480 <u>(1)</u>	(D)	Price \$ 22.11	(Instr. 3 and 4) 1,265	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)

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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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e	Date Exercisable and xpiration Date Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Blow Marla J C/O CARE.COM, INC. 77 FOURTH AVENUE, 5TH FLOOR WALTHAM, MA 02451	Х						
Signatures							
/s/ Diane Musi, as Attorney-in-Fact for Blow	10/01/2018						
**Signature of Reporting Person			Date				
Explanation of Pospor	0001						

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) These shares were issued to the Reporting Person in lieu of board retainer fees of \$10,625.

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.