CVENT INC Form 4 November 30, 2016

FORM 4

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

OMB APPROVAL

OMB 3235-0287 Number:

January 31, 2005

0.5

Estimated average burden hours per

Expires:

response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

Check this box

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

See Instruction

(Middle)

1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person * Lieberman Jeffrey

2. Issuer Name and Ticker or Trading Symbol

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

5. Relationship of Reporting Person(s) to

Issuer

CVENT INC [CVT]

(Check all applicable)

C/O INSIGHT VENTURE

(First)

PARTNERS, 1114 AVENUE OF THE AMERICAS, 36TH FLOOR

(Street)

(State)

3. Date of Earliest Transaction

(Month/Day/Year) 11/29/2016

Filed(Month/Day/Year)

_X__ Director 10% Owner Officer (give title Other (specify

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting Person

NEW YORK, NY 10036

(Zip)

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

	Table 1 - Non-Delivative Securities Acquired, Disposed bi, or Deficiently 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)	ransaction Disposed of (D) ode (Instr. 3, 4 and 5)			Beneficially Form: Owned Direct Following or Indi Reported (I)	Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, par value \$0.001 per share	11/29/2016		Code V	Amount 62,370	or (D)	Price		(Instr. 4)	
Common Stock, par value \$0.001 per share	11/29/2016		U	1,837,118	D	\$ 36	0 (1) (2) (3)	I	See footnotes (1) (2) (3)

Edgar Filing: CVENT INC - Form 4

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of	1
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amou	ınt of	Derivative	į
	Security	or Exercise		any (Month/Day/Year)	Code	of	of (Month/Day/Year) Derivative Securities		Underlying Securities		Security	
(Instr. 3)	(Instr. 3)	Price of			(Instr. 8)) Derivativ					(Instr. 5)	į
		Derivative				Securities			(Instr.	tr. 3 and 4)		
		Security				Acquired	Acquired					1
						(A) or						1
						Disposed						
						of (D)						
						(Instr. 3,						
						4, and 5)						
										A		
										Amount		
						Date	Expiration	or Title Number				
							Exercisable Date					
					G 1 1	7 (A) (B)				of		
					Code \	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Lieberman Jeffrey C/O INSIGHT VENTURE PARTNERS 1114 AVENUE OF THE AMERICAS, 36TH FLOOR NEW YORK, NY 10036



Signatures

/s/ Jeffrey

Lieberman 11/30/2016

**Signature of Date

**Signature of Reporting Person

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) See Exhibit 99.1.
- (2) See Exhibit 99.1.
- (3) See Exhibit 99.1.

Remarks:

Exhibit List:

Reporting Owners 2

Edgar Filing: CVENT INC - Form 4

Exhibit 99.1 - Explanation of Responses

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.