SEC Form 4	
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FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
OMB Number: 3235-0287

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

1. Title of Security	(Instr. 3)		2. Transaction Date	2A. Deemed Execution Date.	3. Transaction	4. Securities Acquired (A Disposed Of (D) (Instr. 3		5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect
		Table I - Non	-Derivative S	Securities Acq	uired, Dis _l	posed of, or Benef	ficially	y Owned		
(City)	(State)	(Zip)						Person		porting
SAN RAFAEL	CA	94903					X	Form filed by Or Form filed by Mo		
(Street)			4. lf A	Amendment, Date of	Original Filed	d (Month/Day/Year)	6. Indi Line)	vidual or Joint/Grou	p Filing (Check	Applicable
	· /	(01/1	0/2021				Chief Rev	enue Officer	
(Last)	(First)	(Middle)		te of Earliest Transa	action (Month/	Day/Year)	x	Officer (give title below)	below	(specify)
1	1 MCINNIS PKWY reet) AN RAFAEL CA 94903			uer Name and Ticke todesk, Inc. [A	0	Symbol		ationship of Reporti k all applicable) Director	0 ()	lssuer Dwner
				nt to Section 16(a) ction 30(h) of the In		es Exchange Act of 1934 npany Act of 1940		hours	s per response:	0.5

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11150. 4)
Common Stock	01/10/2021		A ⁽¹⁾		6,692	Α	\$0.00	27,282 ⁽²⁾⁽³⁾	D	
Common Stock								17,097	Ι	Family Trust ⁽⁴⁾

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

										-					
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. Transa Code (8)		of Deriv Secu Acqu (A) of Dispo of (D)	rities lired r osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The Reporting Person is entitled to receive one share of Common Stock for each Restricted Stock Unit. These Restricted Stock Units vest over a 2-year period, with 10% of the total shares vesting on 7/10/21, an additional 20% on 1/10/22, an additional 30% on 7/10/22, and the final 40% on 1/10/23.

2. The total securities beneficially owned includes 27,229 shares of unvested Restricted Stock Units.

3. Includes shares acquired in September 2020 pursuant to the Issuer's Employee Stock Purchase Plan.

4. The shares are held by the BLUM FAMILY DECL. TR U/A/D 4/20/06 (the "Family Trust"). The reporting person is a trustee of the Family Trust. The reporting person disclaims beneficial ownership

of the shares held by the Family Trust except to the extent of his proportionate pecuniary interest therein.

Remarks:

Pascal W. Di Fronzo,

Attorney-in-Fact for Steven Blum

01/12/2021

** 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 Number.