

[] 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. Issuer Name and Ticker or Trading Symbol						ibol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Jain Priya				C	CASTLIGHT HEALTH, INC. [ CSLT ]									10	0/ 0	
(Last)	(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Director10% Owner  X Officer (give title below) Other (specify below)				
C/O CASTLIGHT HEALTH, INC., 150 SPEAR ST., SUITE 400					5/16/2017							Corporate Controller & CAO				
SPEAR ST.,	SUITE 4			4	If Ar	nendn	nent Date (	)ri ai	inal Fi	led MM	(DD/VVVV)	6 Individual	or Ioint/G	roup Filing	(Chaols Appl	ianhla Lina)
SAN FRANCISCO, CA 94105 (City) (State) (Zip)				7.	4. If Amendment, Date Original Filed (MM/DD/YYYY)						)	_ X _ Form filed by One Reporting Person _ Form filed by More than One Reporting Person				
				Non-De	erivat	ive Se	curities Ac	equi	red, D	isposed	of, or Be	neficially Own	ed			
1. Title of Security (Instr. 3)						3. Trans. Cod (Instr. 8)		4. Securities Acquired (A) Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s)  Ownership of India (Instr. 3 and 4)  Ownership Form:  Benefic			Beneficial		
							Code	v	Amount	(A) or (D)	Price					Ownership (Instr. 4)
Class B Common Stock 5/16/2017				/2017			M (1)		20000	A	\$0	20000		D		
Class B Common Stock 5/17/20				/2017			s		7858 (2)	D	\$3.6487 (3)	12142		D		
	Tab	le II - Deri	vative Se	curities	Bene	ficiall	y Owned (	e.g.	, puts	s, calls,	warrants,	options, conve	rtible sec	curities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date	3A. Deeme Execution Date, if any	(Instr. 8	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	Securities Beneficially Owned Following	Form of Derivative Security: Direct (D)	Beneficial
				Code	· V	(A)	(D)	Date Exe	e rcisable	Expiration Date	n Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	
Restricted Stock Units	\$0 ( <u>4</u> )	5/16/2017		м (1	)		20000		<u>(5)</u>	<u>(5)</u>	Class F commo stock		\$0	60000	D	

### **Explanation of Responses:**

- (1) Release and settlement of restricted stock units ("RSUs") granted to the Reporting Person on May 13, 2016, the grant of which was previously reported by the Reporting Person on a Form 3.
- (2) Represents the aggregate number of shares sold by the Reporting Person on the same day at different prices. All of these shares were sold to cover taxes and fees due upon the release and settlement of the RSUs. The Reporting Person did not sell or otherwise dispose of any of the shares reported on this Form 4 for any reason other than to cover required taxes and fees.
- (3) Represents the weighted average sales price per share. The shares sold at prices ranging from \$3.455 to \$3.85 per share. Full information regarding the number of shares sold at each price shall be provided upon request to the staff of the U.S. Securities and Exchange Commission, the Issuer, or a security holder of the Issuer.
- (4) Each RSU represents a contingent right to receive 1 share of the Issuer's Class B common stock upon settlement for no consideration.
- (5) 25% of the RSUs vested on May 16, 2017 and the remainder will vest quarterly over three years thereafter in equal installments. Shares of the Issuer's Class B common stock will be delivered to the Reporting Person following vesting, at which time shares will be sold by the Reporting Person to cover any tax withholding obligations.

### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Jain Priya								
C/O CASTLIGHT HEALTH, INC. 150 SPEAR ST., SUITE 400			Corporate Controller & CAO					
SAN FRANCISCO, CA 94105								

#### **Signatures**

/s/ Jennifer Chaloemtiarana, by power of attorney	5/17/2017		
**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.