BOX INC Form 3 January 22, 2015 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average burden hours per Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response... 0.5

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Stein Josh			2. Date of Event Requ Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol BOX INC [BOX]					
(Last)	(First)	(Middle)	01/22/2015	4. Relationship Person(s) to Is			Amendment, Date Original (Month/Day/Year)			
4440 EL CAI	MINO RE.	AL								
(Street)			(Check	eck all applicable)		6. Individual or Joint/Group				
LOS ALTOS	, CA 9	4022		X_ Director 10% Owner Filing(Check Ap Officer OtherX_ Form filed by (give title below) (specify below) Person		orm filed by More than One				
(City)	(State)	(Zip)	Table	I - Non-Derivat	ive Securitie	es Benefici	Beneficially Owned			
1.Title of Securi (Instr. 4)	ty			ount of Securities cially Owned 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	Indirect Beneficial			
Reminder: Report owned directly o		ate line for ea	ach class of securities be	eneficially SI	EC 1473 (7-02)					
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.										
Τε	able II - Der	ivative Secu	rities Beneficially Own	ned (e.g., puts, calls,	warrants, opti	ons, convert	tible securities)			
1. Title of Deriv (Instr. 4)	ative Securit	Expi	ration Date Se //Day/Year) De	Title and Amount of ecurities Underlying erivative Security nstr. 4)	4. Conversio or Exercis Price of		(Instr. 5)			

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Stein Josh 4440 EL CAMINO REAL LOS ALTOS, CA 94022	ÂX	Â	Â	Â		
Signatures						
/s/ Peter McGoff, Attorney-in-Fact	0					
**Signature of Reporting Person		Date				

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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).

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Remarks:

Exhibit 24 - Power of Attorney

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.