FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	<b>OF CHAN</b>	GES IN BEN	<b>EFICIAL ON</b>	WNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  Hoffman Jeffrey A.  (Last) (First) (Middle)  C/O BANDWIDTH INC.  900 MAIN CAMPUS DRIVE, SUITE 500				dwidth Inc. [			Symbol		ationship of Reportir k all applicable) Director	g Person(s) to issuer  10% Owner		
				e of Earliest Transa 1/2019	ction (M	lonth/l	Day/Year)	X	Officer (give title Other below) below  Chief Financial Officer		r (specify v)	
——————————————————————————————————————			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicab Line)								
(Street) RALEIGH	NC	27606						X	Form filed by One Form filed by Mo Person			
(City)	(State)	(Zip)										
		Table I - No	n-Derivative S	Securities Acq	uired,	Dis	posed of,	or Ben	eficially	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)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
	Hoffman Jeffrey A.  Last) (First) C/O BANDWIDTH INC. 000 MAIN CAMPUS DRIVE, S Street) RALEIGH NC City) (State)				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Comn	non Stock		02/21/2019		М		4,997	A	\$0.00	4,997	D	
Class A Comn	non Stock		02/21/2019		F		1,484	D	\$52.25	3,513	D	
Class A Comn	non Stock		02/22/2019		М		5,445	A	\$9.16	8,958	D	
Class A Comn	non Stock		02/22/2019		S <sup>(1)</sup>		5,000	D	\$52.95	3,958	D	
Class A Comn	non Stock		02/22/2019		S <sup>(1)</sup>		445	D	\$54.45	3,513	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned nute calle warrante

(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		6. Date Exercisable and Expiration Date (Month/Day/Year)		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				
Restricted Stock Units	(2)	02/21/2019		M			4,997	(3)	(3)	Class A Common Stock	4,997	\$0.00	14,991	D	
Stock Option (right to buy)	\$9.16	02/22/2019		M			5,445	(4)	06/03/2024	Class A Common Stock	5,445	\$0.00	68,495	D	

## **Explanation of Responses:**

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.
- 2. Each Restricted Stock Unit represents a contingent right to receive one share of the Company's Class A Common Stock.
- 3. On February 21, 2018, the Reporting Person was granted 19,988 Restricted Stock Units which vest in four equal annual installments beginning on February 21, 2019.
- 4. The stock option is current exercisable.

## Remarks:

02/25/2019 /s/ Jeffrey A. Hoffman

\*\* 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.