FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burd | en | | | | | | | | |
| 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* <u>Suriano Douglas A</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol Bandwidth Inc. [BAND] | | | | | | | | | k all appli Directo | cable) or | g Per | son(s) to Iss | Owner |
|---|--|--|--|------------------------------|-------------------------------|--|---|------|--|----------|---|---|-------------------------|---|-------------------------------------|--|-------------------------------------|--|--|
| (Last) (Filst) (Milute) I | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/02/2019 | | | | | | | | | Officer below) | (give title | | Other (s below) | specify |
| 900 MAIN CAMPUS DRIVE, SUITE 500 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| Street) RALEIGH NC 27606 | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Nor | -Deriv | ative | Sec | curities | s Ac | quired, D | isp | osed c | of, or Be | nefici | ally | Owned | ı . | | | |
| Date | | | | 2. Trans Date (Month/i | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispose Code (Instr. 5) | | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | and Securiti Benefic | | es ally Following | Form (D) o | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | / | Amount | (A) o (D) | Price | 9 | Transac | saction(s) c. 3 and 4) | | | (11341. 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. Deeme Execution if any (Month/Day | Date, | 4. Transa Code (1 8) | | of | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | | nd 7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4) | | De Se (Ir | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | E) Da | piration ate | Amo or Num of Shar | | per | | | | | |
| Restricted Stock Units | (1) | 01/02/2019 | | | A | | 1,815 | | (2) | | (2) | Class A Common Stock | 1,815 | | \$0.00 | 1,815 | | D | |

Explanation of Responses:

- 1. Each Restricted Stock Unit represents a contingent right to receive one share of the Company's Class A Common Stock.
- $2.\ The\ Restricted\ Stock\ Units\ vest\ in\ four\ equal\ quarterly\ installments\ beginning\ on\ March\ 31,\ 2019.$

Remarks:

/s/ W. Christopher Matton,

Attorney-in-Fact for Douglas

A. Suriano

** Signature of Reporting Person Date

01/04/2019

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

- * 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.