SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number:	3235-0287							
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 EXTREME NETWORKS INC [EXTR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
Thomas Remi								<u> </u>	<u></u> [Directo	r		10% Ov	vner					
											- :	C Officer	(give title		Other (s below)	specify						
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year)								, , ,	Children E		, , ,					
6480 VI.	A DEL OR	O			11/20/2	11/26/2020									EVP Chief Financial Officer							
														1								
(Street)					4. If Am	endment, Date o	of Origin	al File	ed ((Month/Day	//Ye	ar)	6. In		ividual or Joint/Group Filing (Check Applicable							
SAN JO	SE C	A	95119											, 🔨 Form f	iled by One	e Repo	rting Perso	n				
														Form f	iled by Mor	re than	One Repor	ting				
(City)	(5	tate)	(Zip)											Persor	ı ⁷			, in the second				
(Oity)	(0)		(ביף)																			
		Tal	ole I - Non	n-Deriv	ative Se	ecurities Ac	quire	l, Di	sp	osed of	f, o	r Bene	eficiall	y Owned								
1. Title of Security (Instr. 3)			Date (Month/Day/Year)		ar) 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				5) Securitie Benefici	5. Amount of Securities Beneficially Owned Following		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
							, v		Amount	(A) or (D) PI		Price	Transact	Transaction(s) (Instr. 3 and 4)			(Instr. 4)					
Common	Stock			11/26	/2020		М	29,777		77 A		\$ <mark>0</mark>	167,038			D						
Common	Stock		11/26/2		/2020		F			14,764(1)		D	\$5.75	152,274			D					
			Table II - I	Derivat	tive Sec	urities Acq	uired.	Dis	po	sed of.	or	Benef	iciallv	Owned								
						ls, warrants																
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date, Transactio Code (Inst		5. Number of Derivative Securities Acquired (A) or	6. Date Expirat (Month	on Da	te				s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following	ə s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

	Security		(A) or Disposed of (D) (Instr. 3, 4 and 5)			oosed D) (Instr.						Following Reported Transaction(s) (Instr. 4)	(I) (Instr. 4)	. ,	
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
RSU Award	\$0	11/26/2020	М			29,777	11/26/2019 ⁽²⁾	11/26/2021	Common Stock	29,777	\$ 0	119,107	D		

Explanation of Responses:

1. Represents shares withheld from the released share award for the payment of applicable income and payroll withholding taxes due on release.

2. This Time-based RSU award vests from the original grant date as to 1/3 on the one year anniversary and 1/12 each quarter thereafter.

/s/ Katy Motiey, Power of

** Signature of Reporting Person

Attorney for Remi Thomas

Date

11/30/2020

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.