## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| wasnington, | D.C. | 20549 |  |
|-------------|------|-------|--|
|             |      |       |  |

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5           |
| obligations may continue. See          |
| netruction 1/h)                        |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person*     Kheirolomoom Ali   |        |                         |   |                                 |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Guidewire Software, Inc. [ GWRE ] |   |   |  |             |   |  |                             | (Check               | k all app<br>Dire  | olicable)<br>ctor   | 10%   | Person(s) to Issuer  10% Owner Other (specify)                    |  |
|--|--------|-------------------------|---|---------------------------------|--|--|---|---|--|-------------|---|--|-----------------------------|----------------------|--|---|---|---|--|
| (Last)<br>1001 E. F  | `      | rst) (<br>E BLVD., SUIT | Middle) E 800                             |                                 | 3. Date of Earliest Tran<br>03/17/2016 |  |   |   | saction (                                      | n/Day/Year) |   |  | X                           |                      | Officer (give title Other (specify below)  Chief Product Officer   |   |   |   |  |
| (Street) FOSTER (City)   | CITY C |                         | )4404<br>Zip)                             |                                 | - 4. If                                | 4. If Amendment, Date of Original Filed (Month/Day/Year)                             |   |   |  |             |   |  | 6. Indiv<br>Line)<br>X      | Forr<br>Forr         | idual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |   |   |   |  |
|  |        | Tabl                    | e I - No                                  | on-Deriv                        | /ative                                 | Sec  | uritie  | s Ac                                    | quirec   | l, Di       | sposed o  | f, or E  | Benefi                      | cially               | Own  | ed  |   |   |  |
|  |        |                         |   | 2. Transac<br>Date<br>(Month/Da | /Day/Year) if a                        |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |   | 3.<br>Transaction<br>Code (Instr.<br>8)        |             | 4. Securities Acquired (A) or<br>Disposed Of (D) (Instr. 3, 4 a |  |                             | nd 5) Secur<br>Benef |  | ficially<br>d Following   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |        |                         |   |                                 |  |  |   |   | Code   | v           | Amount  | (A) o<br>(D)   | Price                       | •                    | Trans  | action(s)<br>3 and 4)   |   | (   |  |
| Common Stock   |        |                         |   | 03/17/                          | 2016                                   |  |   |   | S <sup>(1)</sup>                               |             | 216   | D  | \$52                        | .2971                | 1  | 12,560  | D   |   |  |
| Common Stock 03a   |        |                         | 03/17/                                    | 2016                            | 2016                                   |  |   | S <sup>(1)</sup>                        |  | 1,384       | D \$52.2  |  | .2987                       | 2987 11,176          |  | D   |   |   |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |        |                         |   |                                 |  |  |   |   |  |             |   |  |                             |                      |  |   |   |   |  |
| Derivative Conversion Date E<br>Security or Exercise (Month/Day/Year) if   |        |                         | 3A. Dee<br>Execution<br>if any<br>(Month/ |                                 |  | ansaction ode (Instr.   1  |   | mber rative rities ired r osed ) : 3, 4 | 6. Date Exerc<br>Expiration Da<br>(Month/Day/Y |             | ite   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. and 4) |                             | Deri<br>Sec<br>(Ins  | rice of<br>ivative<br>urity<br>tr. 5)  | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(struction(struction)) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)                             |  |
|  |        |                         |   |                                 | Code                                   | v  | (A)   | (D)                                     | Date<br>Exercis                                | sable       | Expiration<br>Date  | Title  | or<br>Numbe<br>of<br>Shares | r                    |  |   |   |   |  |

## **Explanation of Responses:**

1. Shares sold by Issuer to cover taxes associated with settlement of Restricted Stock Units.

By: Winston King Attorney in Fact For: Ali Kheirolomoom

03/18/2016

\*\* Signature of Reporting Person

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.