FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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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 OF SECURITIES

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

(Print or Ty	ype Respon	ses)															
1. Name and Address of Reporting Person * GUBER PETER				2. Issuer Name and Ticker or Trading Symbol Digital Turbine, Inc. [APPS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director Officer (give title Other (specify below)							
(Last) (First) (Middle) 1300 GUADALUPE STREET, SUITE 302				3. Date of Earliest Transaction (Month/Day/Year) 02/10/2015										below)			
(Street) AUSTIN, TX 78701				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person _X_Form filed by More than One Reporting Person					ı		
(City)	(S	tate) (Zip)		Table I - I	Non-De	rivati	ive Secu	rities	Acqui	red, Disp	osed	of, or l	Beneficia	ally Owne	d		
1.Title of Security (Instr. 3)		Date (Month/Day/Year)		Deemed ution Date, if nth/Day/Year)	Code		4. Securities Acquired (A) Disposed of (I (Instr. 3, 4 and		(D)	5. Amount of Securities Beneficially Ow Following Repo		wned Form orted Direc		` /	direct ficial ership		
					Code	v	Amount	(A) or (D)		Transaction(s) (Instr. 3 and 4)			or India (I) (Instr. 4	Ì	. 4)		
Common	1 Stock	02/10/2015			A ⁽¹⁾		12,800	A	\$0	3,333,14	43 <mark>(2</mark>))	I	See Foot 2.	note		
Reminder: directly or		a separate line for ea	ch cla	ass of securitie	s benefic	cially	owned										
						info rec	ormatic quired t	n co o res	ntaine pond	nd to the ed in this unless the control r	form he fo	are r	not		C 1474 (9-02)		
				ntive Securities uts, calls, war	-		-			•	wned	l					
1. Title of	2.	3. Transaction		. Deemed	4.	*	5.			Exercisab	le	7. Titl	e and	8. Price o	f 9. Number of	10.	11. Natur
Derivative Security (Instr. 3)	Conversio or Exercise Price of Derivative Security	Date (Month/Day/Year)	r) any	ecution Date, i y lonth/Day/Yea	Code	Transaction Code (Instr. 8)		Number a		oiration Date /Day/Year)		Amou Under Secur (Instr. 4)	rlying	Derivative Security (Instr. 5)	e Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Security: Direct (D) or Indirect	
					Code	e V		I	Date Exercis	Expii able Date	ration	Title I	Amount or Number of Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GUBER PETER 1300 GUADALUPE STREET SUITE 302 AUSTIN, TX 78701	X						
GUBER FAMILY TRUST 1300 GUADALUPE STREET SUITE 302 AUSTIN, TX 78701	X						

Signatures

/s/ Peter Guber 03/09/20)15

Signature of Reporting Person	Date
/s/ Peter Guber, Trustee of the Guber Family Trust	03/09/2015
Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- Grant of shares of restricted common stock (the "Shares") pursuant to Issuer's Amended and Restated 2011 Equity Incentive Plan. Such
- (1) Shares were issued as part of Reporting Person's annual compensation for service as a director of Issuer. The Shares vest 50% on the date of grant, and 25% on each of May 1, 2015 and August 1, 2015.
- Beneficial ownership: 212,800 shares are held by the Reporting Person and 3,120,343 shares are held by the Guber Family Trust (the (2) "Trust") of which the Reporting Person is a trustee. Reporting Person disclaims beneficial ownership of shares held by the Trust except to the extent of his pecuniary interest therein.

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.