FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

**OMB APPROVAL** 3235-0287 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*     Chen Weidong						2. Issuer Name and Ticker or Trading Symbol Casa Systems Inc [ CASA ]									k all app Direc	licable) tor er (give title	ng Person(s) to I 10% C Other below)		owner (specify
(Last) (First) (Middle) C/O CASA SYSTEMS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 07/21/2021										nief Techn	olog	y Officer		
100 OLD RIVER ROAD						If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) ANDOVER MA 01810				4. 117	Line)  X Form filed by One									e Reporting Person re than One Reporting					
(City)	(State) (Zip)													reisc	Л				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		and Securit		ties For cially (D) d Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or Pri	ce	Transa	action(s) 3 and 4)			(1130.4)
Common Stock 07/21/20					.021				S <sup>(1)</sup>		65,000	D	\$	7.9 <sup>(2)</sup>	2,4	00,361		D	
Common Stock 07/22/20					021				S <sup>(1)</sup>		65,000	D \$7		7.77 <sup>(3)</sup>	2,335,361			D	
	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)	re Conversion Date Execution Date,		on Date, Transacti Code (Ins					6. Date Exercis Expiration Date (Month/Day/Yea		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Sei (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
			Code	v			Date Exercisable		Expiration Date	Numb of Title Share									

## **Explanation of Responses:**

- $1. \ The sales \ reported in this \ Form \ 4 \ were \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ the \ reporting \ person.$
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$7.32 to \$7.98, inclusive. The reporting person undertakes to provide to Casa Systems, Inc., any security holder of Casa Systems, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$7.68 to \$7.89, inclusive. The reporting person undertakes to provide to Casa Systems, Inc., any security holder of Casa Systems, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

## Remarks:

/s/ Timothy C. Rodenberger, as Attorney-in-Fact

07/23/2021

\*\* 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.