FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

l	OMB Number: 3235-0287								
	Estimated average burden								
l	hours per response:	0.5							

Section obligat	n 16. Form 4 or tions may contil tion 1(b).		d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940							34			ated ave	erage burder ponse:	n 0.5			
1. Name and Address of Reporting Person* Guo Jerry						2. Issuer Name and Ticker or Trading Symbol Casa Systems Inc [CASA]						(Che	elationship o eck all applic	able)	ig Perso	on(s) to Issi 10% Ov		
(Last) (First) (Middle) C/O CASA SYSTEMS, INC. 100 OLD RIVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 02/23/2021					>				Other (specify below)				
(Street) ANDOVER MA 01810 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	ndividual or Joint/Group Filing (Check Applicable 2) X Form filed by One Reporting Person Form filed by More than One Reporting Person				n			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						action 2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Of (D) (Code (Instr.		s Acquired (A) or f (D) (Instr. 3, 4 and 5)		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A (D	() or))	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
			Table II -			curities IIs, warr								Owned				
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, T urity or Exercise (Month/Day/Year) if any C		Co	ansaction Derivative E ode (Instr. Securities (M		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity 4)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivativ Securitie Beneficia Owned Followin Reported Transact	re es ally g d tion(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
1												A	mount		(Instr. 4)			1

Explanation of Responses:

(1)

02/23/2021

1. Each Restricted Stock Unit ("RSU") represents the right to receive one share of common stock, \$0.001 par value per share (the "Common Stock") of Casa Systems, Inc. (the "Company") upon vesting, subject to the reporting person's continued service relationship with the Company and the other terms and conditions set forth in the applicable RSU agreement. In the sole discretion of the Company's board of directors, the Company may, with respect to any applicable vesting date, deliver to the reporting person Stock or cash having a fair market value equal to the number of shares of Common Stock underlying the portion of the RSU that vested on such date, payable within 30 days of the vesting date, less applicable taxes.

Date Exercisable

(2)

(D)

Expiration Date

(2)

Title

Commor

Stock

2. These RSUs are scheduled to vest over four years, with 25% of the shares underlying the award vesting on January 1, 2022, and 25% of the shares underlying the award vesting at the end of each successive one-year period thereafter. These RSUs have no expiration date.

Remarks:

Restricted

Stock

Units

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

Amount Number of Shares

481,213

\$0.00

02/25/2021

481,213

D

** 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).

Code v

A

(A)

481,213

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.