| UNITED STATES SECURITIES AND EXCHANGE COMMISSION | OMB AF | PROVAL |
|---|---|--|
| INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF | OMB Number: | 3235-0104 |
| | Expires: | January 31, 2005 |
| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | Estimated average burden hours per response n | |
| | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB AP OMB Number: INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES Expires: Estimated a burden hour |

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> Gosen David | | 2. Date of Event Requiring Statement (Month/Day/Year) | ³ 3. Issuer Name and Ticker or Trading Symbol Rocket Fuel Inc. [FUEL] | | | | | |
|---|---------|---|--|--|--|---|--|--|
| (Last) | (First) | (Middle) | 02/07/2017 | 4. Relationship of Reporting Person(s) to Issuer | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | |
| 2000 SEAF | ORT BLV | D, 4TH | | | | | | |
| FLOOR | | , | | (Chec | k all applicable) | | | |
| (Street) REDWOOD CITY, CA 94063 | | | Director 10% Owner XOfficer Other (give title below) (specify below) SVP, Intl & GM, Platform | | Filing(Check Applicable Line) _X_ Form filed by One Reporting | | | |
| (City) | (State) | (Zip) | Table I - I | Table I - Non-Derivative Securities Beneficially Owned | | | | |
| 1.Title of Sect (Instr. 4) | ırity | | 2. Amount o Beneficially (Instr. 4) | of Securities Owned | Ownership C | . Nature of Indirect Beneficial Ownership Instr. 5) | | |
| Reminder: Rep owned directly | - | | ach class of securities benefic | cially | SEC 1473 (7-02) | | | |
| 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 control number. | | | | | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | |

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security | | 4. Conversion or Exercise | 5. Ownership Form of | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|--|--------------------|--|----------------------------------|------------------------------------|---|---|
| | Date Exercisable | Expiration Date | (Instr. 4) Title | Amount or Number of Shares | Price of Derivative Security | Derivative Security: Direct (D) or Indirect (I) | |

| Edgar Filing: | Rocket Fuel | Inc Form 3 |
|---------------|-------------|------------|
|---------------|-------------|------------|

| | | | | | (Ins | str. 5) | | |
|--|------------|------------|-----------------|-----------|----------------|---------|----|--|
| Employee Stock Option (right to buy) | <u>(1)</u> | 06/03/2026 | Common Stock | n 100,000 | \$ 2.41 | D | Â | |
| Reporting Owner | rs | | | | | | | |
| Reporting Owner Name / Address | | | Relationships | | | | | |
| | | Director 1 | 0% Owner | Officer | | Othe | er | |
| Gosen David 2000 SEAPORT BLVD, 4TH REDWOOD CITY, CA 94 | | Â | Â | SVP, Intl | & GM, Platform | ιÂ | | |
| Signatures | | | | | | | | |
| /s/ Jeannette Bjoernsen, as attorney-in-fact for David Gosen 02/08/2017 | | | | | | | | |

<u>**</u>Signature of Reporting Person Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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).

(1) One-fourth of the shares subject to the option vest and become exercisable on June 3, 2017 and one forty-eighth of the shares vest and become exercisable monthly thereafter, subject to Reporting Person's continued service to Issuer as of each such date.

Date

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.