FORM 4

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

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

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

(pe Response	S)													
1. Name and Address of Reporting Person * BECKER DENNIS RONALD			2. Issuer Name and Ticker or Trading Symbol MOBIVITY HOLDINGS CORP. [MFON]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner					
(Last) (First) (Middle) 55 N. ARIZONA PLACE, SUITE 310			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2017							X_ Office	er (give title bele CH	(AIRMAN, C	ther (specify be	elow)	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 07/05/2017						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
CHANDLER, AZ 85225										To fill fried by More than One Reporting Person					
(City)	(State)	(Zip)	ŗ	Гable	I - Non	-Derivat	ive Se	curities	Acqui	red, Disp	osed of, or I	Beneficially (wned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		if Co		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficial Reported	nt of Securities ally Owned Following d Transaction(s)		6. Ownership Form:	Beneficial		
				(Month/Day/Ye		Code	V An	nount	(A) or (D)	Price	(Instr. 3 a	nd 4)		Direct (D) Ov or Indirect (Ir (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock		06/30/2017			P		,000		\$ 0.7	164,795)	
Reminder:	Report on a s	separate line for	each class of secur	ities beneficially	owned	T I	Persons	who	respo			ction of inf			474 (9-02)
Reminder:	Report on a s	separate line for	Table II - l	Derivative Secur	ities A	cquire	Persons containe the form	who ed in disp	responding this for blays a	m are currer eficiall	not requ ntly valid	ired to res	ormation spond unles rol number	s	474 (9-02)
	•		Table II - I	Derivative Secur	ities A	cquire	Persons containe the form d, Dispos ions, con	who ed in disp sed of	responding this for blays a for Bendels secu	m are currer eficiall rities)	not requantly valid	ired to res	pond unles	s	, ,
1. Title of	•	3. Transaction Date	Table II - 1 (3A. Deemed Execution Da ear) any	Derivative Secur	5. Num of Deri Secu Acq (A) Disp of (I	acquire nts, opt hber vative arities uired or	Persons containd the form	s who ed in the disposed of neutral Exercise iration	respondence of this for blays a sable of the secundary of	rities) 7. Ti Amo Undo Secu	not requ ntly valid	OMB cont	pond unles	f 10. Ownersh Form of Derivativ Security Direct (I or Indire	11. Natur of Indired Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BECKER DENNIS RONALD 55 N. ARIZONA PLACE, SUITE 310 CHANDLER, AZ 85225	X		CHAIRMAN, CEO			

Signatures

/s/ Dennis Becker	07/05/2017
**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).

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.