

Lipps Robert M
Form 3
April 23, 2008

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Lipps Robert M		(Month/Day/Year)	SONIC FOUNDRY INC [SOFO]	
(Last)	(First)	(Middle)	04/16/2008	
222 W WASHINGTON AVE			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
MADISON,Â WIÂ 53703			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			(give title below) (specify below)	<input type="checkbox"/> Form filed by More than One Reporting Person
			Executive Vice President Sales	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	750	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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 (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Title	Amount or Number of		

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				Shares		(I) (Instr. 5)	
1995 Incentive Stock Option Plan	Â (1)	04/10/2016	Common Stock	25,000	\$ 2.26	D	Â
1995 Incentive Stock Option Plan	Â (2)	12/07/2016	Common Stock	7,500	\$ 3.71	D	Â
1995 Incentive Stock Option Plan	Â (3)	12/04/2017	Common Stock	15,000	\$ 1.55	D	Â
1995 Incentive Stock Option Plan	Â (4)	03/10/2018	Common Stock	25,000	\$ 0.75	D	Â
1995 Incentive Stock Option Plan	Â (5)	04/16/2018	Common Stock	100,000	\$ 0.78	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Lipps Robert M 222 W WASHINGTON AVE MADISON, WI 53703	Â	Â	Â Executive Vice President Sales	Â

Signatures

Robert M. Lipps 04/23/2008
 **Signature of Date
 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) 16,667 is currently exercisable and 8,333 will be exercisable on 4/10/09
- (2) 2,500 is currently exercisable, 2,500 will be exercisable on 12/7/08 and 2,500 will be exercisable on 12/7/09
- (3) 5,000 will be exercisable on 12/4/08, 5,000 will be exercisable on 12/4/09 and 5,000 will be exercisable on 12/4/10
- (4) 8,334 will be exercisable on 3/10/09, 8,333 will be exercisable on 3/10/10 and 8,333 will be exercisable on 3/10/11
- (5) 33,334 will be exercisable on 4/16/09, 33,333 will be exercisable on 4/16/10 and 33,333 will be exercisable on 4/16/11

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.