Edgar Filing: Thompson Michael Shawn - Form 4

Thompson M	lichael Shawn												
Form 4													
July 06, 2018	3												
FORM	4										PPROVAL		
	UNITE	D STATES				ND EXC D.C. 205		NGE (COMMISSION	OMB Number:	3235-0287		
Check thi if no long	or									Expires:	January 31,		
subject to		EMENT O	F CHAN		GES IN BENEFICIAL OWNERSHI					Estimated a	2005 average		
Section 10		SEC				ECURITIES					irs per		
Form 4 or									response	response 0.5			
Form 5 obligation	• • • • •								ge Act of 1934,				
may conti				•		•			f 1935 or Sectio	n			
<i>See</i> Instru 1(b).	ction	30(h)) of the Inv	vestmen	it C	Company	y Act	of 19	40				
(Print or Type R	lesponses)												
1 Nama and A	ddrass of Doportiu	ng Darson *	2 I	N T					5 Deletionship of	f Doporting Dor	con(a) to		
Thompson Michael Shawn Symbol OSI SYS				er Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer				
				STEMS INC [OSIS]									
									(Check all applicable)				
				ate of Earliest Transaction					D. (100			
				onth/Day/Year) 05/2018					Director 10% Owne X Officer (give title Other (spec				
12525 CIII II	DROIVER	UL	07/03/20	/10					below)	below)			
									Preside	nt, OSI Electro	nics		
				nendment, Date Original					6. Individual or Joint/Group Filing(Check				
				Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
		n								More than One Re			
HAWIHUR	NE, CA 90250	0							Person				
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction I	Date 2A. De	emed	3.		4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye		ion Date, if			nAcquired			Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month	/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
		(Day I Cal)	(msu. c	(III)		msu. 5, 4 and 5)		Following	(Instr. 4)	(Instr. 4)			
							(A)		Reported				
							or		Transaction(s)				
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	07/05/2018			А		1,272 (1)	А	\$0	2,499	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. iorNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code N	⁷ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Thompson Michael Shawn 12525 CHADRON AVENUE HAWTHORNE, CA 90250			President, OSI Electronics					
Signatures								
/s/ Michael Shawn								

Thompson 07/06/2018

**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).
- (1) Shares are restricted stock units issued to the Reporting Person pursuant to the OSI Systems, Inc. 2012 Incentive award Plan. Vesting and amount of shares is subject to achievement of performance targets.

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.