## Edgar Filing: MAXIM INTEGRATED PRODUCTS INC - Form 4

MAXIM INTEGRATED PRODUCTS INC Form 4 November 18, 2014

November 16	5, 2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549									OMB Number:	3235-0287	
Check this box if no longer									Expires:	January 31, 2005	
subject to Section 10 Form 4 or	STATEN 6.	STATEMENT OF CHANGES IN BENEFICIAL SECURITIES						NERSHIP OF	Estimated a burden hour response	verage	
obligation may conti	Form 5 obligations may continue.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 R	lesponses)										
Caron David Symbo MAX			Symbol					5. Relationship of Reporting Person(s) to Issuer			
				I INTEGI CTS INC		[]		(Check all applicable)			
(Month/Da				•				Director 10% Owner X Officer (give title Other (specify below) below)			
160 RIO ROBLES 11/17/2				014				VP and Principal Acct Officer			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SAN JOSE,	CA 95134							Form filed by M Form filed by M			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of,	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		n Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	11/17/2014			F	730	D	\$ 29.57	15,266 <u>(1)</u>	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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities (1, 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	. ,	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
I B	Director	10% Owner	Officer	Other				
Caron David 160 RIO ROBLES SAN JOSE, CA 95134			VP and Principal Acct C	Officer				
Signatures								
BY MARK CASPER FOR DA CARON	VID	11	/18/2014					
**Signature of Reporting Person			Date					
Explanation of Poenoneoe:								

## **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) Represents unvested Restricted Stock Units and Common Stock.

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.