#### Edgar Filing: BARTON JAMES M - Form 4

Form 4 December 02.											
FORM	4 UNITE									PPROVAL 3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	er <b>STATI</b> 5. Filed p snue. Section 1	STATEMENT OF CHANGES IN 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							burden hou response	Estimated average burden hours per response 0.5	
(Print or Type R	esponses)										
BARTON JAMES M Symbol			euer Name <b>and</b> Ticker or Trading ol O INC [tivo]				5. Relationship of Reporting Person(s) to Issuer				
(Least)	(First)						(Check all applicable)				
								Director 10% Owner X Officer (give title Other (specify below) below) Sr. VP R&D & CTO			
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
ALVISO, CA	A 95002							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any	emed on Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V		sposed	of	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	12/01/2004			S	15,000	D	\$ 5	814,999	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. Transac Code (Instr. 8)	5. tionNumber of ) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code Y	V (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			
BARTON JAMES M C/O TIVO INC 2160 GOLD STREET PO BOX 2160 ALVISO, CA 95002			Sr. VP R&D & CTO				
Signatures							
Kim To, Attorney-in-Fact For: James M. Barton		12/02/2					
**Signature of Reporting Person		Date	,				
Evaluation of Deener							

## **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).

#### **Remarks:**

Automatic sale.

The stock transactions listed on this Form 4 are effective pursuant to a Rule 10b5-1 Trading plan adopted by the reporting personal stock transactions listed on this Form 4 are effective pursuant to a Rule 10b5-1 Trading plan adopted by the reporting personal stock transactions are effective pursuant to a Rule 10b5-1 Trading plan adopted by the reporting personal stock transactions are effective pursuant to a Rule 10b5-1 Trading plan adopted by the reporting personal stock transactions are effective pursuant to a Rule 10b5-1 Trading plan adopted by the reporting personal stock transactions are effective pursuant to a Rule 10b5-1 Trading plan adopted by the reporting personal stock transactions are effective pursuant to a Rule 10b5-1 Trading plan adopted by the reporting personal stock transactions are effective personal stock transactions are effective personal stock transactions and transactions are effective personal stock transactions ar

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.