Edgar Filing: INTEVAC INC - Form 4

NETRIACING

Form 4	INC												
June 08, 20	15												
FORM	14		CECU				NOD			OMB APPROVAL			
	UNITED	RITIES AND EXCHANGE COMMISSION ashington, D.C. 20549					OMB Number:	3235-02	287				
Check th if no lor subject to Section Form 4 Form 5 obligation may cor <i>See</i> Inst 1(b).	nger to 16. or Filed pur ^{Dns} Section 17(rsuant to S (a) of the I	Section Public U	SECUE	RITIES ne Securit ding Cor	ties E npan	Exchai y Act	WNERSHIP OF nge Act of 1934, of 1935 or Sectio 940	Estimated burden hou response	January			
(Print or Type	Responses)												
1. Name and Address of Reporting Person _2. IssBlonigan Wendell ThomasSymbol				Iccuer				Reporting Person(s) to					
	INTEVAC INC [IVAC]					(Check all applicable)							
(Last) 3560 BASS	(First) (Middle)		of Earliest Tr Day/Year) 2015	ransaction			X Director X Officer (giv below) Pre		6 Owner her (specify			
(Street) 4. If Am			4. If Am	Amendment, Date Original 6. Individ			6. Individual or J	ual or Joint/Group Filing(Check					
SANTA CI	LARA, CA 95054	Ļ	Filed(Mo	onth/Day/Yea	r)			Applicable Line) _X_ Form filed by Form filed by Person					
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Secui	rities A	cquired, Disposed o	of, or Beneficia	lly Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D) 4 and 3 (A) or	r) 5)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	2		
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities benef	•		•	or indirectly.	ction of	SEC 1474			

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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Ar
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Se
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title
Non-Qualified Stock Option (right to buy)	\$ 5.62	06/04/2015		А	75,000	06/04/2016 <u>(1)</u>	06/04/2022	Common Stock
Restricted Stock Units	\$ 0	06/04/2015		А	40,000	05/15/2016(2)	<u>(3)</u>	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Blonigan Wendell Thomas 3560 BASSETT STREET SANTA CLARA, CA 95054	Х		President & CEO					
Signatures								
By: Kevin Soulsby For: Wende Blonigan	211	06/0	8/2015					
<u>**</u> Signature of Reporting Person		D	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) The option will vest and become exercisable in three equal installments upon the Reporting Person's completion of each year of service over the three-year period measured from the grant date.

These are restricted stock units awarded to the Reporting Person and each restricted stock unit represents a contingent right to receive one
 (2) share of IVAC common stock. The restricted stock units vest in three equal installments upon the Reporting Person's completion of each year of service over the three-year period measured from the vesting commencement date.

(3) Vested shares will be delivered to the Reporting Person as soon as possible after each vesting date.

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.