## Edgar Filing: POWER INTEGRATIONS INC - Form 4

POWER IN Form 4 May 13, 201	TEGRATIONS I	NC									
									OMB AF	PROVAL	
FORM	UNITED	STATES		RITIES A shington			ANGE CO	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to <b>STATEMENT</b> (			F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940					ERSHIP OF	Expires: Estimated a	January 31, 2005 Iverage	
Section Form 4 of Form 5 obligation may con <i>See</i> Instr 1(b).	1935 or Section	burden hour response						•			
(Print or Type	Responses)										
Matthews David MH Symbol POWER				er Name <b>and</b> Ticker or Trading R INTEGRATIONS INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
<b>a</b> 5			[POWI]	-						0	
5245 HELLYER AVE(Month/E(Street)4. If Ame			e of Earliest Transaction n/Day/Year) /2014				Director 10% Owner X Officer (give title Other (specify below) below) VP of Product Development				
			onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
SAN JOSE	, CA 95138						ī	Form filed by Mo Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	e Secu		ired, Disposed of,	or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ed Date, if	3. Transactic Code (Instr. 8)		ties A sed of 4 and (A) or	cquired (A) (D)	· • •	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	05/09/2014			D	474	D	\$ 49.0772	19,341	D		
Reminder: Re	port on a separate line	e for each cl	ass of secu	irities bene	ficially ow	ned d	irectly or in	directly.			

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	ress Relationships						
	Director	10% Owner	Officer	Other			
Matthews David MH 5245 HELLYER AVE SAN JOSE, CA 95138			VP of Product Development				
Signatures							
By: /s/ Eric Verity Attorney In Matthews	Fact For:	05/13/2014					
<u>**</u> Signature of Repo	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).

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.