Edgar Filing: KULICKE & SOFFA INDUSTRIES INC - Form 4

KULICKE & SOFFA INDUSTRIES INC

Form 4 July 11, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average

Form 4 or Form 5 obligations may continue. See Instruction

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

burden hours per response... 0.5

1(b).

(City)

(Print or Type Responses)

| 1. Name and Address of Reporting Person * PIERCE GARRETT E | | | 2. Issuer Name and Ticker or Trading Symbol KULICKE & SOFFA INDUSTRIES INC [KLIC] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |
|--|---------|----------|---|--|
| (Last) 1005 VIRGINI | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 07/07/2017 | X Director 10% Owner Officer (give title below) Other (specify below) |
| (Street) FORT WASHINGTON, PA US 19034 | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person |

(State)

(Zip)

| (City) | (State) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | |
|------------------------|--------------------------------------|--|-------------------|---|-------------------------|--------------|-----------------------|--|--|--|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. Transaction | 4. Securities Acquired (A) oner Disposed of (D) | 5. Amount of Securities | 6. Ownership | 7. Nature of Indirect | | | |
| (Instr. 3) | | any | Code | (Instr. 3, 4 and 5) | Beneficially | Form: | Beneficial | | | |
| | | (Month/Day/Year) | (Instr. 8) | | Owned | Direct (D) | Ownership | | | |
| | | | | | Following | or Indirect | (Instr. 4) | | | |
| | | | | (A) | Reported | (I) | | | | |
| | | | | (A) | Transaction(s) | (Instr. 4) | | | | |
| | | | Code V | or Amount (D) Price | (Instr. 3 and 4) | | | | | |
| Common Stock | 07/07/2017 | | S | 690 (1) D \$ 19.5601 | 119,613 | D | | | | |

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

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)

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| 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. Transaction Code (Instr. 8) | of | | ite Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr | |
|---|---|---|---|---|-----------|-------------|--------------|---|---|---|--|
| | | | | | 4, and 5) | Date | Expiration | | Amount | | |
| | | | | Code V | (A) (D) | Exercisable | Date | Title | Number of Shares | | |

Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other PIERCE GARRETT E 1005 VIRGINIA DRIVE X FORT WASHINGTON, PA US 19034

Signatures

Susan L. Waters, Attorney-in-Fact for Garrett E. 07/11/2017 Pierce

> **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) The shares covered by this Form 4 were sold pursuant to a Rule 10b5-1(c) sales plan dated November 17, 2016.

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.

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