

GOODE GARY F
Form 4
April 30, 2019

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
GOODE GARY F

2. Issuer Name and Ticker or Trading Symbol
GENTEX CORP [GNTX]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
C/O 600 NORTH CENTENNIAL STREET

3. Date of Earliest Transaction (Month/Day/Year)
04/29/2019

____ Director
____ Officer (give title below)
____ 10% Owner
____ Other (specify below)

(Street)

4. If Amendment, Date Original Filed (Month/Day/Year)

6. Individual or Joint/Group Filing (Check Applicable Line)

ZEELAND, MI 49464

Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				(A) or (D)	Price		
Common Stock	04/29/2019	04/29/2019	M	5,045	A \$ 10.56	21,045	D
Common Stock	04/29/2019	04/29/2019	S	5,045	D \$ 23.2004 (1)	16,000	D
Common Stock	04/30/2019	04/30/2019	M	6,955	A \$ 10.56	22,955	D
Common Stock	04/30/2019	04/30/2019	S	6,955	D \$ 23.201 (2)	16,000	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.

SEC 1474
(9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Security (Instr. 3 and 4)	8. Amount or Number of Shares
Non-employee Director Stock Option (Right to buy)	\$ 10.56	04/29/2019	04/29/2019	M	5,045	11/13/2010 05/13/2020	Common Stock	5,045
Non-employee Director Stock Option (Right to buy)	\$ 10.56	04/30/2019	04/30/2019	M	6,955	11/13/2010 05/13/2020	Common Stock	6,955

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

GOODE GARY F
C/O 600 NORTH CENTENNIAL STREET
ZEELAND, MI 49464

Signatures

/s/ Robert L. Hughes for GOODE GARY F by Power of Attorney

04/30/2019

__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) This transaction was executed in multiple trades at prices ranging from \$23.20 to \$23.205. The price reported above reflects the weighted average price.

Edgar Filing: GOODE GARY F - Form 4

- (2) This transaction was executed in multiple trades at prices ranging from \$23.20 to \$23.21. The price reported above reflects the weighted average sale price.

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.