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APPLIED M. Form 4 April 06, 201	ATERIALS II 5	NC /DE										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
	UNITE	Washington, D.C. 20549							OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or	er STATI 5.	STATEMENT OF CHANGES IN					S IN BENEFICIAL OWNERSHIP OF CURITIES					
Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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								0.5				
(Print or Type R	esponses)											
Karsner Alexander Syml				Name and D MATE				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(M				3. Date of Earliest Transaction (Month/Day/Year) 04/02/2015				X_ Director 10% Owner Officer (give title Other (specify below)				
Filed(Month				ndment, Date Original th/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 				
SANTA CLA	ARA, CA 950	54						Person		1 8		
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	emed on Date, if Day/Year)	3. Transactic Code (Instr. 8)	Disposed (Instr. 3,	l (A) c l of (D 4 and (A) or)) 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 Indirect Beneficial Ownership (Instr. 4)		
Common Stock	04/02/2015			Code V A	Amount 8,980 (1)	(D) A	Price \$ 0	22,762	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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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		Relationships						
FB	I	Director	10% Owner	Officer	Other			
Karsner Alexander C/O APPLIED MATERIALS, INC. 3050 BOWERS AV, M/S 1268 P.O. BOX SANTA CLARA, CA 95054	X 58039	Х						
Signatures								
/s/ Harpreet S. Bal, Attorney-in-Fact	04/06/2015	5						

Date

**Signature of Reporting Person

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).

Represents automatic annual grant of restricted stock units to non-employee member of the Board of Directors pursuant to the Applied Materials, Inc. ("Applied") Employee Stock Incentive Plan. These restricted stock units will be converted on a one-for-one basis into

(1) shares of Applied common stock upon vesting, which vesting is scheduled to occur on March 1, 2016 (subject to accelerated vesting in connection with the closing of the business combination between Applied and Tokyo Electron Limited and continued service as a director through the vest 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.