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LEUNG SII Form 4 June 05, 20 FORN Check th if no lor subject to Section Form 4 Form 5 obligatio	4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Boox Boox STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934.						OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5			
may con See Inst 1(b).	tinue. Section 17(a) of th	a) of the Investmen	•	-	•		1			
(Print or Type	Responses)									
1. Name and LEUNG SI	Address of Reporting Person <u>*</u> MON	2. Issuer Name an Symbol		r Tradi	ng	5. Relationship of Issuer	Reporting Pers	on(s) to		
(Last)	(First) (Middle)	3. Date of Earliest T				(Check all applicable)				
	BEL DRIVE	(Month/Day/Year) 06/01/2018				Director X Officer (give below) SVP, GC &		Owner r (specify retary		
	(Street)	4. If Amendment, D Filed(Month/Day/Yea	-	al		6. Individual or Joi Applicable Line) _X_ Form filed by O	ne Reporting Per	rson		
EDEMONI							are then One De	norting		
	Г, СА 94538					Person	ore than One Re	porting		
(City)	(State) (Zip)				-	Person iired, Disposed of,	or Beneficial	ly Owned		
	(State) (Zip) 2. Transaction Date 2A. De (Month/Day/Year) Execut any	emed 3.	Derivative 4. Securi or(A) or D (Instr. 3,	ties A ispose	cquired d of (D)	Person iired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		y Owned 7. Nature of Indirect		
(City) 1.Title of Security (Instr. 3)	(State) (Zip) 2. Transaction Date (Month/Day/Year) 2A. De Execut any (Month	emed 3. on Date, if Transacti Code /Day/Year) (Instr. 8) Code V	4. Securi on(A) or D (Instr. 3,	ties Adispose 4 and (A) or	cquired d of (D) 5) Price	Person iired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	y Owned 7. Nature of Indirect Beneficial Ownership		
(City) 1.Title of Security	(State) (Zip) 2. Transaction Date 2A. De (Month/Day/Year) Execut any	emed 3. on Date, if Transacti Code /Day/Year) (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ties Adispose 4 and (A) or	cquired d of (D) 5)	Person iired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I)	y Owned 7. Nature of Indirect Beneficial Ownership		
(City) 1.Title of Security (Instr. 3)	(State) (Zip) 2. Transaction Date (Month/Day/Year) 2A. De Execut any (Month	emed 3. on Date, if Transacti Code /Day/Year) (Instr. 8) Code V	4. Securi or(A) or D (Instr. 3, Amount	ties Adispose 4 and (A) or (D)	cquired d of (D) 5) Price \$	Person hired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	y Owned 7. Nature of Indirect Beneficial Ownership		
(City) 1.Title of Security (Instr. 3) Common Stock Common	(State)(Zip)2. Transaction Date (Month/Day/Year)2A. De Execut any (Month)06/01/2018	emed 3. on Date, if Transacti Code /Day/Year) (Instr. 8) Code V S(<u>1)</u>	4. Securi on(A) or D (Instr. 3, Amount 4	ties Adispose 4 and (A) or (D) D	cquired d of (D) 5) Price \$ 108.29 \$	Person hired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 21,876	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	y Owned 7. Nature of Indirect Beneficial Ownership		
(City) 1.Title of Security (Instr. 3) Common Stock Common Stock Common	(State)(Zip)2. Transaction Date (Month/Day/Year)2A. De Execut any (Month)06/01/2018306/01/2018	emed 3. on Date, if Transacti Code /Day/Year) (Instr. 8) Code V $S(\underline{1})$ $S(\underline{1})$	4. Securi on(A) or D (Instr. 3, Amount 4 96	ties Adispose 4 and (A) or (D) D D	Cquired d of (D) 5) Price \$ 108.29 \$ 108.27 \$ 108.26	Person hired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 21,876 21,780	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) D	y Owned 7. Nature of Indirect Beneficial Ownership		

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Common Stock	06/01/2018	S <u>(1)</u>	100	D	\$ 108.06	21,380	D
Common Stock	06/01/2018	S <u>(1)</u>	100	D	\$ 108.01	21,280	D
Common Stock	06/01/2018	S <u>(1)</u>	30	D	\$ 107.96	21,250	D
Common Stock	06/01/2018	S <u>(1)</u>	70	D	\$ 107.94	21,180	D
Common Stock	06/01/2018	S <u>(1)</u>	100	D	\$ 107.9	21,080	D
Common Stock	06/01/2018	S <u>(1)</u>	35	D	\$ 107.37	21,045	D
Common Stock	06/01/2018	S <u>(1)</u>	65	D	\$ 107.32	20,980	D
Common Stock	06/01/2018	S <u>(1)</u>	100	D	\$ 107.08	20,880	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
				(Instr. 3, 4, and 5)						
				.,	Date Exercisable	Expiration Date		Amount or Number of		

Code V (A) (D)

Relationships

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer

Other

Shares

LEUNG SIMON 44201 NOBEL DRIVE FREMONT, CA 94538

SVP, GC & Corporate Secretary

Signatures

/s/ Simon Y. Leung

06/05/2018

<u>**</u>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 sales reported on this Form 4 were effectuated pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on July 12, 2017.

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.