## Edgar Filing: InvenSense Inc - Form 4

InvenSense Inc Form 4 June 27, 2016										
FORM 4 UNITED STATE						-	PPROVAL			
<b>CURIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check this box if no longer						Expires:	January 31,			
subject to STATEMENT O	- NIATEWENTORCHANCENIN KENERICIAL OWNERSHIP OF						Estimated average			
Section 16.	SECURITIES						burden hours per			
Form 4 or Form 5 Filed pursuant to	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						0.5			
abligations	Public Utility Holdi					n				
may continue.	) of the Investment C	•	- ·			11				
See Instruction 30(II 1(b).	) of the investment c	Joinpang	y met	0117	-10					
1(0).										
(Print or Type Responses)										
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or Trading					5. Relationship of	f Reporting Per	son(s) to			
Abdi Behrooz L.	Symbol				Issuer					
InvenSense Inc [INVN]					(Check all applicable)					
(Last) (First) (Middle)	· · · · · · · · · · · · · · · · · · ·				X Director					
C/O INVENSENSE INC 1745	(Month/Day/Year)	-					b Owner er (specify			
C/O INVENSENSE INC., 1745 TECHNOLOGY DRIVE	06/24/2016				below)	below)				
					CEO	O and President				
(Street)		mendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person					
						Nore than One Reporting				
5/11/3052, 2/2/3110					Person					
(City) (State) (Zip)	Table I - Non-De	rivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned			
1.Title of 2. Transaction Date 2A. De	emed 3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of			
· · · · · · · · · · · · · · · · · · ·						Form: Direct	Indirect			
(Instr. 3) any (Month	Code Disposed of (D) Day/Vaar (Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
(Month/Day/Year) (Instr. 8) (Instr. 3, 4						(Instr. 4)	(Instr. 4)			
			(A)		Reported					
			or		Transaction(s) (Instr. 3 and 4)					
	Code V		(D)	Price	(mour. 5 and 4)					
Common 06/24/2016 Stock	F	3,248 (1)	D	\$6	268,599	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)

## Edgar Filing: InvenSense Inc - Form 4

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Abdi Behrooz L. C/O INVENSENSE INC. 1745 TECHNOLOGY DRIVE SAN JOSE, CA 95110	Х		CEO and President				
Signatures							
/s/ Jim Callas, Attorney-in-Fact Abdi	rooz L	06/27/2016					
**Signature of Reporting Pe		Date					
Evenlay attack of Day							

## **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) Payment of tax liability through withholding of shares in connection with the vesting of a security issued in accordance with Rule 16b-3.

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.