Edgar Filing: SunEdison Semiconductor Ltd - Form 4

SunEdison Semic	onductor Lt	d							
Form 4 April 04, 2016									
FORM 4									PPROVAL
	UNITED	STATES		RITIES A			COMMISSIO	N OMB Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> 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 20(b) of the Investment Company Act of 1040							Estimated burden hoi response	urs per
(Print or Type Respon	ises)								
1. Name and Address of Reporting Person <u>*</u> Dunnigan William Joseph			2. Issuer Name and Ticker or Trading Symbol SunEdison Semiconductor Ltd [SEMI]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (1 C/O SUNEDISO SEMICONDUCT PEARL DRIVE	N	Middle) ED, 501		of Earliest Tr Day/Year) 2016	ransaction		Director X Officer (gi below) Senior V		
(Street) ST. PETERS, MO 63376			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			
	000070						Person		
(City) (S	State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned
	nsaction Date h/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect
				Code V	Amount	(D) Price	(insure and i)		
Reminder: Report on	a separate line	for each cl	ass of sec	urities benef	ficially ow	ned directly of	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number of Transaction Code Securities (Instr. 8) 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 Securities (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Share Option (right to buy)	\$ 6.28	04/01/2016		A	76,600		<u>(1)</u>	04/01/2026	Ordinary Shares	76,600
Restricted Stock Units	(2)	04/01/2016		А	14,500		(3)	(3)	Ordinary Shares	14,500

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Reporting Owners

Reporting Owner Name / Address		Relationships					
F B	Director	10% Owner	Officer	Other			
Dunnigan William Joseph C/O SUNEDISON SEMICONDUCTOR LIMITEI 501 PEARL DRIVE ST. PETERS, MO 63376)		Senior V.P. and General Mgr.				
Signatures							
Sally H. Townsley, under Power of Attorney	04/04/2016						
**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 Employee Share Option vests in increments of 25% over four years commencing on April 1, 2017.
- (2) Each restricted stock unit represents a contingent right to receive one ordinary share of SunEdison Semiconductor Limited.
- (3) The restricted stock units vest in increments of 25% over four years commencing on April 1, 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.