XIE BING Form 4 August 15, 2017

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

January 31, Expires: 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response...

5. Relationship of Reporting Person(s) to

Form 5 obligations may continue. See Instruction

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

2. Issuer Name and Ticker or Trading

0.5

1(b).

YIE BING

(Print or Type Responses)

1. Name and Address of Reporting Person *

XIE BING Sy			S INSTRUM	ENTS INC		(Check all applicable)			
(Last) (First) (Middle) 3. Date of I (Month/Da 12500 TI BOULEVARD 04/29/20			•	saction		Director 10% OwnerX Officer (give title Other (specify below) Senior Vice President			
	(Street)	endment, Date (nth/Day/Year)	Original		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
DALLAS, TX 75243 — Form filed by More Person						More than One Re	eporting		
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Transaction A Code E (Instr. 8)	4. Securities Acquired (A) o Disposed of (D (Instr. 3, 4 and (A) or Amount (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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	04/29/2016		G V 1	120 <u>(1)</u> D	\$0	68,102 <u>(2)</u>	D		
By Trust						68,050 (2) (3)	I	By Trust	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)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)

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3) Pri	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date Exercisable	Expiration Date	Title N	Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

XIE BING

12500 TI BOULEVARD Senior Vice President

DALLAS, TX 75243

Signatures

/s/ Muriel C. McFarling, Attorney 08/15/2017 in Fact

> **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).
- The gift of 120 shares was inadvertently not reported on a Form 5 for 2016, so it is being reported at this time on Form 4. The "V" code is **(1)** marked only because of software limitations.
- Reflects a transfer of 10,000 shares from direct ownership to indirect ownership that occurred on April 29, 2016 and was exempt from **(2)** Section 16 reporting. The effect of this exempt transaction was not reported on Form 4 filings made prior to the date of this filing.
- (3) Shares held in trust for the benefit of family members of which reporting person is a trustee.

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.

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