## Edgar Filing: LITTELFUSE INC /DE - Form 4

| LITTELFUS<br>Form 4<br>March 11, 20                             |                                    |                      |                               |  |               |       |  |  |  |           |  |  |
|---|------------------------------------|----------------------|-------------------------------|--|---------------|-------|--|--|--|-----------|--|--|
| FORM  | 4                                  |                      |                               |  |               |       |  |  | OMB AF   | PROVAL    |  |  |
|   | UNITE                              | D STATES             |                               | ITIES A<br>hington,  |               |       | NGE C  | OMMISSION  | OMB<br>Number:   | 3235-0287 |  |  |
| Subject to<br>Section 16.<br>Form 4 or                          |                                    |                      |                               | IGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES              |               |       |  |  | Expires:January 31Expires:2005Estimated averageburden hours perresponse0.5 |           |  |  |
| Form 5<br>obligation<br>may conti<br><i>See</i> Instru<br>1(b). | inue. Section 1                    | 7(a) of the 1        | Public Ut                     |  | ling Con      | ipany | y Act of   | e Act of 1934,<br>1935 or Section<br>0   | 1  |           |  |  |
| (Print or Type R  | Responses)                         |                      |                               |  |               |       |  |  |  |           |  |  |
| GRILLO ANTHONY Symbol   |                                    |                      | er Name and Ticker or Trading |  |               |       | 5. Relationship of Reporting Person(s) to Issuer |  |  |           |  |  |
|   |                                    |                      |                               | TELFUSE INC /DE [LFUS]                                     |               |       |  | (Check all applicable)   |  |           |  |  |
| (Mon  |                                    |                      | (Month/D                      | Date of Earliest Transaction<br>onth/Day/Year)<br>/07/2014 |               |       |  | X_ Director<br>Officer (give<br>below)   | title 10% Owner<br>Other (specify below)                                   |           |  |  |
|   |                                    |                      |                               | endment, Date Original<br>onth/Day/Year)                   |               |       |  | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person            |  |           |  |  |
| CHICAGO,  | IL 60631                           |                      |                               |  |               |       |  | Form filed by M<br>Person  | lore than One Re   | porting   |  |  |
| (City)  | (State)                            | (Zip)                | Table                         | e I - Non-D  | erivative     | Secur | ities Acq  | uired, Disposed of   | , or Beneficial  | ly Owned  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)                            | 2. Transaction D<br>(Month/Day/Yea | ar) Execution<br>any |                               | 3.<br>Transactic<br>Code<br>(Instr. 8)<br>Code V           | (Instr. 3,    | spose | d of (D)   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)       |           |  |  |
| Common<br>stock   | 03/07/2014                         |                      |                               | A  | 26 <u>(1)</u> | A     | \$<br>94.58                                      | 63,679   | 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: LITTELFUSE INC /DE - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | of     | (Month/Day/Year)<br>ve<br>ss<br>i |   | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and 4 | <ul><li>8. Price of<br/>Derivative<br/>Security<br/>(Instr. 5)</li><li>4)</li></ul> | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---------------------------------------|--------|-----------------------------------|---|--|---|---|
|   |   |   | Code V                                | (A) (I | D) Date<br>Exercisable            | * | Title Amou<br>or<br>Numb<br>of<br>Shares                                 | er  |   |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                         | Relationships |            |         |       |  |  |  |  |
|---|---------------|------------|---------|-------|--|--|--|--|
|   | Director      | 10% Owner  | Officer | Other |  |  |  |  |
| GRILLO ANTHONY<br>8755 WEST HIGGINS ROAD<br>CHICAGO, IL 60631 | Х             |            |         |       |  |  |  |  |
| Signatures  |               |            |         |       |  |  |  |  |
| Ryan Stafford, by power of attorney                           | (             | )3/11/2014 |         |       |  |  |  |  |
| <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) Represents shares acquired pursuant to reinvestment of dividends on shares held pursuant to a deferred compensation plan.

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.