Edgar Filing: Allred L. Chance - Form 4

Allred L. Ch	ance										
Form 4	7										
July 17, 2017 FORN Check th	4 UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287 January 31,	
if no long subject to Section 1 Form 4 o Form 5 obligation may cont	suant to S a) of the I	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section					e Act of 1934, 1935 or Sectior	Expires: 200 Estimated average burden hours per response 0			
See Instru 1(b).	uction	30(n)	of the In	vestment	Compan	y Aci	. 01 194	0			
(Print or Type I	Responses)										
Allred L. Chance Symbol			er Name and Ticker or Trading Solar, Inc. [VSLR]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N	Middle)		f Earliest Tr				(Check	all applicable)	
(Month 1800 WEST ASHTON BLVD (Street) 4. If An			(Month/D	Ionth/Day/Year) //17/2017 If Amendment, Date Original ed(Month/Day/Year)				Director 10% Owner X_ Officer (give title Other (specify below) below) Chief Sales Officer			
								 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
LEHI, UT 8	4043							Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative S	Securi	ties Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Executior any (Month/D	n Date, if	3. Transactic Code (Instr. 8) Code V	4. Securit on(A) or Dis (Instr. 3, 4)	sposed	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	07/17/2017			S <u>(1)</u>	60,764	D	\$ 5.175 (2)	91,463	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)

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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	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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				
Allred L. Chance 1800 WEST ASHTON BLVD LEHI, UT 84043			Chief Sales Officer					
Signatures								
/s/ Dana C. Russell, attorney-in-fact		07/17/2017						
**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 by Mr. Allred were effected pursuant to a Rule 10b5-1 trading plan.

The "Amount" and "Price" reported in this Column 4 reflect the aggregate number and weighted-average price, respectively, of shares sold. These shares were sold in multiple transactions at prices ranging from \$4.85 to \$5.50, inclusive. The reporting person undertakes to

(2) solar mode shares were solar in multiple transactions at prices ranging non 94.05 to \$5.50, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth herein.

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.