Edgar Filing: Tamer Ford - Form 4

Tamer Ford										
Form 4										
January 28, 2019										
FORM 4								OMB AF	PPROVAL	
	UNITED STA		ITIES AI hington,]			IGE C	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer								Expires:	January 31,	
subject to	STATEMEN	T OF CHAN			CIAI	L OWI	NERSHIP OF	Estimated a	2005 average	
Section 16.							burden hours per			
Form 4 or		~		~	_			response 0		
Form 5 obligations	-	nt to Section 16				-				
may continue.			•	U .			1935 or Section	n		
See Instruction		30(h) of the Inv	vestment (Company	Act	of 194	10			
1(b).										
(Print or Type Respons	ses)									
· • • • •										
1. Name and Address	of Reporting Perso	on <u>*</u> 2. Issuer	2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to			
Tamer Ford	Symbol	-				Issuer				
	INPHI C					(Check all applicable)				
(Last) (F	First) (Middl	e) 3. Date of	Earliest Tra	nsaction			(Chec	k all applicable	;)	
		(Month/Da	ay/Year)				X Director	10%	Owner	
2953 BUNKER H	HILL LANE, ST	ГЕ 01/24/20)19				XOfficer (give below)	title Other below)	er (specify	
300							· · · · · · · · · · · · · · · · · · ·	sident & CEO		
(\$	treet)	4 If Amer	ndment Dat	e Original			6 Individual or Ic	int/Group Filir	ισ(Check	
			If Amendment, Date Original ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
							X Form filed by C			
SANTA CLARA,	, CA 95054						Form filed by M Person	Iore than One Re	eporting	
(City) (S	tate) (Zip)	Table	e I - Non-De	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of 2. Tra	ansaction Date 24	A. Deemed	3.	4. Securiti	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security (Mon	nth/Day/Year) Ex	xecution Date, if					Securities	Form: Direct		
(Instr. 3)	an	•	Code(D)Day/Year)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially	· /	Beneficial	
	(N	Ionth/Day/Year)	(Instr. 8)	(Instr. 3, 4	and 3)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
							Reported	(mouter)	(mour. r)	
					(A) or		Transaction(s)			
			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock 01/2	24/2019		А	13,474 (1)	A	\$0	472,017	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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
F F	Director	10% Owner	Officer	Other			
Tamer Ford 2953 BUNKER HILL LANE, STE 300 SANTA CLARA, CA 95054	Х		President & CEO				
Signatures							
/s/ John Edmunds, attorney-in-fact	01/28/2019)					
**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 restricted stock units vest as to 25% of the shares on each of 3/25/2019, 6/24/2019, 9/23/2019 and 12/16/2019.

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.