Edgar Filing: RAMBUS INC - Form 4

DAMPLIC INC

| Form 4 | | | | | | | | | | | |
|--|---|----------------------|--|--------------------------------|---|-------------------------------|----------------------------------|---|---|----------------------|--|
| February 01, FORM Check this if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b). | 4 UNITED S s box er STATEM 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. | ENT OF suant to S | Was F CHAN Section 10 Public Ut | Shington, GES IN I SECUR | D.C. 20 BENEFI ITIES Securit ling Con | 549 ICIA ies E ipany | L OW xchange Act of | COMMISSION NERSHIP OF e Act of 1934, f 1935 or Section 0 | OMB Number: Expires: Estimated a burden hou response | • | |
| (Print or Type R | esponses) | | | | | | | | | | |
| SHRIGLEY DAVID A Syn | | | 2. Issuer Name and Ticker or Trading Symbol RAMBUS INC [RMBS] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) 1050 ENTEI 700 | (First) (M RPRISE WAY, S | | 3. Date of (Month/D 01/30/20 | • | ansaction | | | _X_ Director Officer (give below) | 10% | Owner er (specify | |
| SUNNYVA | (Street) LE, CA 94089 | | | ndment, Dat th/Day/Year) | - | l | | 6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person | One Reporting Pe | rson | |
| (City) | (State) (| Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | ecurity (Month/Day/Year) Execution Date, if | | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price | | | | | | p 7. Nature of t Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | 01/30/2017 | | | S <u>(1)</u> | 5,000 | (D) D | Price \$ 13.76 (2) | 56,253 | D | | |
| Common Stock | | | | | | | | 4,300 | I | See Footnote (3) | |

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.

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 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) | 4. Transactio Code (Instr. 8) | 5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Own 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 | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| SHRIGLEY DAVID A 1050 ENTERPRISE WAY, SUITE 700 SUNNYVALE, CA 94089 | Х | | | | | | |
| Signatures | | | | | | | |
| /s/William Krause, by power of attorney | 02/0 | 1/2017 | | | | | |
| **Signature of Reporting Person | Γ | 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 sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 14, 2016.
- (2) All shares were sold at an exact sale price of \$13.76.
- (3) Shares are currently held by the Shrigley Family Foundation in which the Reporting Person serves as principal.

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.