## Edgar Filing: Ranaldi Robert - Form 4

Ranaldi Rob	ert										
Form 4											
February 26	, 2013										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITED	STATES		shington,			INGE C	UMINIISSIUN	OMB Number:	3235-0287	
Check this box if no longer subject to STATEMENT OF CHAR									Expires:	January 31, 2005	
				NGES IN BENEFICIAL OWNERS				ERSHIP OF	Estimated average		
Section 16. Form 4 or				SECUR	RITIES				burden hours per		
Form 5		rsuant to S	Section 1	6(a) of th	e Securi	ties F	Exchange	e Act of 1934,	response	0.5	
obligatio	ns Section 170						-	1935 or Sectior	ı		
may cont See Instr	unue.			vestment	•	-	•				
1(b).					-						
	,										
(Print or Type ]	Responses)										
1. Name and Address of Reporting Person * Ranaldi Robert2. Issuer Symbol								5. Relationship of Reporting Person(s) to			
								Issuer			
			PTC IN	NC. [PMTC]				(Check all applicable)			
(Last)	(First) (	Middle)		f Earliest T	ransaction						
	DICV STDEET			Day/Year)				Director 10% Owner X Officer (give title Other (specify			
140 KENDRICK STREET02/25/2			013				below) below)				
									Vorldwide Sale		
			endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check				
Filed(Mor							Applicable Line) _X_ Form filed by One Reporting Person				
NEEDHAM	I, MA 02494							Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acqu	iired, Disposed of	or Beneficiall	v Owned	
1.Title of	2. Transaction Date	e 2A. Deen		3.	4. Securi		-	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	n Date, if Transaction(A) or Disposed of (D)					Securities	Ownership	Indirect		
(Instr. 3)		any (Month/D	Nov/Voor)	Code (Instr. 3, 4 and 5) $(Instr. 3, 4 and 5)$				Beneficially	Form: Direct		
		(Month/E	Jay/Tear)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(msu: 5 and 4)			
Common	02/25/2013			S	4,000	D	\$ 23.435	26,074	D		
Stock	02/25/2015			5	(1)	D	(2) (2)	20,074	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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director 10% Owner Officer		Officer	Other				
Ranaldi Robert 140 KENDRICK STREET NEEDHAM, MA 02494			EVP Worldwide Sales					
Signatures								
Catherine Gorecki by power of attorney filed 4/29/2011			02/26/2013					
**Signature of Reporting	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) Shares sold pursuant to a pre-established 10b5-1(c) trading plan.

This transaction was executed in multiple trades at prices ranging from \$23.25 to \$23.65. The price reported above reflects the weighted
 (2) average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

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.