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PLEXUS CORP Form 4 October 05, 2016 FORM 4 Nultied States Securities Securiti											
(Print or Type											
FOATE DEAN A Symbol					Tradi	0	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N		EXUS COR				(Check	c all applicable	:)		
ONE PLEX	onth/Day/Year) /03/2016				X_ Director 10% Owner Officer (give titleX_ Other (specify below) below) Chairman of the Board						
NEENAH,	(Street) WI 54956	f Amendment, I ed(Month/Day/Ye	-	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State) ((Zip)	Table I - Non	-Derivative	Secur	ities Acqu	iired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any (Month/Day/Y	Code	iomr Dispos (Instr. 3, 4	ed of 4 and 3 (A) or	(D) 5)) 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, \$.01 par value			Code V	7 Amount	(D)	Price	8,140	D <u>(1)</u>			
Common Stock, \$.01 par value	10/03/2016		М	31,000	A	<u>(2)</u>	211,907	D			
Common Stock, \$.01 par value	10/03/2016		М	34,200	А	<u>(2)</u>	246,107	D			

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Common Stock, \$.01 par value	10/03/2016	М	34,900	A	(2)	281,007	D
Common Stock, \$.01 par value	10/03/2016	F	49,651	D	\$ 46.802	231,356	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)

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. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Restricted Stock Units	<u>(3)</u>	10/03/2016		А	45,778		(3)	(3)	Common Stock	45,778
Restricted Stock Units	(2)	10/03/2016		М		31,000	(2)	(2)	Common Stock	31,000
Restricted Stock Units	(2)	10/03/2016		М		34,200	(2)	(2)	Common Stock	34,200
Restricted Stock Units	<u>(2)</u>	10/03/2016		М		34,900	(2)	(2)	Common Stock	34,900

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
FOATE DEAN A	Х			Chairman of the Board			
ONE PLEXUS WAY							

NEENAH, WI 54956

Signatures

Dean A. Foate, by Kate A. Gitter, Attorney-in-Fact

**Signature of Reporting Person

10/05/2016

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).
- Shares of Plexus Corp. common stock held in the Plexus Corp. Employee Stock Purchase Plan as of the last report from the Plan's (1) Trustee.

Each Restricted Stock Unit granted under the Plexus Corp. 2008 Long-Term Incentive Plan, which qualifies under Rule 16b-3, represented a contingent right to receive one share of Plexus Corp. common stock. The Restricted Stock Units vested and settled (and the

- (2)Reporting Person's outstanding stock options vested) on October 3, 2016, pursuant to the Reporting Person's previously disclosed Retirement and Transition Agreement.
- Each Restricted Stock Unit granted under the Plexus Corp. 2016 Omnibus Incentive Plan, which qualifies under Rule 16b-3, represents a (3) contingent right to receive one share of Plexus Corp. common stock. The Restricted Stock Units vest on October 3, 2017.

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.