IMMERSION CORP

Form 4

March 05, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box

if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue.

See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

(Last)

ROBLES

Security

(Instr. 3)

1. Name and Address of Reporting Person * VIEGAS VICTOR

(First)

2. Issuer Name and Ticker or Trading Symbol

IMMERSION CORP [IMMR]

3. Date of Earliest Transaction

(Month/Day/Year) 03/03/2015

C/O IMMERSION CORP, 30 RIO

(Middle)

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

SAN JOSE, CA 95134

(City) (State) (Zip) 1. Title of 2. Transaction Date 2A. Deemed

(Month/Day/Year)

3. 4. Securities 5. Amount of Execution Date, if TransactionAcquired (A) or Securities

Code (Month/Day/Year) (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

Owned Following Reported Transaction(s) (Instr. 3 and 4)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

below)

Person

Beneficially

_X__ Director

Applicable Line)

X_ Officer (give title

Code V Amount (D) Price

(A)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 3. Transaction Date 3A. Deemed 4. 5. Number of 6. Date Exercisable and 7. Title and Amor Derivative Conversion (Month/Day/Year) Execution Date, if **Transaction**Derivative **Expiration Date** Underlying Secur Security or Exercise Code Securities (Month/Day/Year) (Instr. 3 and 4) any

OMB APPROVAL

3235-0287

January 31,

2005

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Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

CEO

6. Ownership

Form: Direct

(D) or Indirect Beneficial

6. Individual or Joint/Group Filing(Check

X Form filed by One Reporting Person Form filed by More than One Reporting

(I)

(Instr. 4)

below)

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

Indirect

Estimated average

burden hours per

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Disposed of	equired (A) or sposed of (D) astr. 3, 4, and				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am Nui Sha
Non-Qualified Stock Option (right to buy)	\$ 8.09	03/03/2015		A		150,000		<u>(1)</u>	03/03/2022	Common Stock	15

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 6	Director	10% Owner	Officer	Other			
VIEGAS VICTOR							
C/O IMMERSION CORP	X		CEO				
30 RIO ROBLES	Λ		CEO				
SAN JOSE, CA 95134							

Signatures

/s/ Victor Viegas by Amie Peters,
Attorney-in-Fact

**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).

The shares subject to the performance option shall vest according to a time vesting schedule with 25% of the shares subject to the option vesting on March 3, 2016 and 2.0833% of the shares subject to the option vesting monthly thereafter, but only if the closing price of a share of the Issuer's common stock as reported on the Nasdaq Global Market is equal to or exceeds \$10.52 for 30 consecutive trading days following March 3, 2015 and on or prior to March 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.

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