Edgar Filing: Upadhyaya Raj B - Form 4

| Upadhyaya Form 4 | Raj B | | | | | | | | | | |
|---|--------------------------|---|--|---|--|---------|--|--|---|---|--|
| December 1 | 3, 2018 | | | | | | | | | | |
| FORM | | | CTT I | NGE | | | OMB APPROVAL | | | | |
| | UNITED | Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | | | 3235-0287 | |
| Check the if no lon subject to Section Form 4 of | so STATEN 16. | | | | | | | | | Expires:January 31, 2005Estimated averageburden hours per response0.5 | |
| Form 5 obligation may corn <i>See</i> Insta 1(b). | ons Section 17 | 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 | | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| Upadhyaya Raj B _{Sy} SI | | | 2. Issuer Name and Ticker or Trading Symbol SIGMATRON INTERNATIONAL INC [SGMA] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) C/O SIGM INTERNA LANDMEJ | ATRON TIONAL, INC., 2 | Middle) 3 (1 1 | . Date o | f Earliest T Day/Year) | ransaction | | | below) | ve title 04 below) titve Vice Presid | | |
| | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 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) | Tab | le I - Non-l | Derivative | Secu | rities A | cquired, Disposed | of, or Beneficia | lly Owned | |
| 1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, any (Month/Day/Year) | | ate, if | Code (Instr. 8) | Disposed (Instr. 3, | (A) or of (D) 4 and 2 (A) or |) 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) | | |
| | | | | Code V | | | Price | | | | |
| Reminder: Re | port on a separate line | e for each class | s of secu | urities bene | ficially ow | ned di | rectly o | 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) | Transaction Date 3A. Deemed ionth/Day/Year) Execution Date, if any (Month/Day/Year) | | 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 Shares | |
| Stock Option (right to buy) (1) | \$ 3.2 | 12/11/2018 | | А | 14,000 | 12/11/2018 | 12/10/2028 | Common Stock | 14,000 | |
| Reporting Owners | | | | | | | | | | |

| Reporting Owner Name / Address | | Relationships | | | | | | |
|--|------------|---------------|--------------------------|---------|-------|--|--|--|
| | | | | Officer | Other | | | |
| Upadhyaya Raj B C/O SIGMATRON INTEF 2201 LANDMEIER RD. ELK GROVE VILLAGE, | | | Executive Vice President | | | | | |
| Signatures | | | | | | | | |
| /s/ Raj B. Upadhyaya | 12/13/2018 | | | | | | | |

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** 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 14,000 options acquired as described on this Table II were issued on December 11, 2018, pursuant to and under a single stock option plan and stock option agreement.

(2) This column needs to be blank.

**Signature of

Reporting Person

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.