Edgar Filing: KRAMP RICHARD W - Form 4

| KRAMP RICHARD Form 4 August 03, 2018 | W | | | | | | | | |
|---|--|---|--|---|--|---|--|--|--|
| | | | AND EXCHANGE | | OMB A | PPROVAL | | | |
| Check this box | OMB Number: | 3235-0287 January 31, | | | | | | | |
| if no longer subject to Section 16. Form 4 or | STATEMENT (| | N BENEFICIAL O JRITIES | Expires: 200 Estimated average burden hours per response 0. | | | | | |
| abligations | Form 5 obligations may continue.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. Name and Address of Reporting Person <u>*</u> KRAMP RICHARD W | | Symbol | nd Ticker or Trading | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| (Last) (First |) (Middle) | NVE CORP /N 3. Date of Earliest | | (Chec | ck all applicable) | | | | |
| 174 STONEBRIDG | E ROAD | (Month/Day/Year) 08/02/2018 |) | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | | | |
| (Stree ST. PAUL, MN 551 | | 4. If Amendment, Filed(Month/Day/Y | | 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 | e) (Zip) | Table I - Nor | 1-Derivative Securities A | | , or Beneficia | lly Owned | | | |
| 1.Title of Security (Instr. 3)2. Transac (Month/D) | any | n Date, if Transact Code Day/Year) (Instr. 8) | 4. Securities ionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or V Amount (D) Price | SecuritiesFBeneficially(1)Owned(1) | . Ownership form: Direct D) or Indirect I) Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| Reminder: Report on a se | parate line for each | | | or indirectly. | | | | | |
| | | | Persons who re- information con required to resp | spond to the collec tained in this form ond unless the form ntly valid OMB con | are not n | SEC 1474 (9-02) | | | |

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. Number | 6. Date Exercisable and | 7. Title and Amour |
|-------------|-------------|---------------------|--------------------|------------|-----------------|-------------------------|--------------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | onof Derivative | Expiration Date | Underlying Securit |
| Security | or Exercise | | any | Code | Securities | (Month/Day/Year) | (Instr. 3 and 4) |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Acquired | | |

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| | Derivative Security | | | | (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | | | | |
|-------------------------------|------------------------|------------|------|---|--|-----|---------------------|--------------------|-----------------|---------------------------------|--|
| | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amo or Num of Share | |
| Non-Qualified Stock Option | \$ 107.86 | 08/02/2018 | A | | 1,000 <u>(1)</u> | | 08/02/2018 | 08/02/2028 | Common Stock | 1,0 | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| KRAMP RICHARD W 174 STONEBRIDGE ROAD ST. PAUL, MN 55118 | Х | | | | | | | |
| Signatures | | | | | | | | |
| /s/Curt A. Reynders, by power attorney | of | 08/03 | 3/2018 | | | | | |

<u>**</u>Signature of Reporting Person

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).

Date

(1) Option granted automatically on Mr. Kramp's reelection to NVE's Board of Directors

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.