Edgar Filing: GAULKE MICHAEL R - Form 4

GAULKE M	ICHAEL R										
Form 4	_										
June 04, 2018	3										
FORM 4 UNITED STATES SECUR									OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this box if no longer				GES IN BENEFICIAL OWN					Expires:	January 31,	
								NERSHIP OF		2005	
Section 16.				SECURITIES					Estimated average burden hours per		
Form 4 or	•								response	•	
Form 5 obligation	· ·						-	ge Act of 1934,			
may conti				•	•			f 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestment (Company	/ Act	of 19	40			
1(b).											
(Print or Type R	(esponses)										
(The of Type is	esponses)										
1. Name and A	ddress of Reporting	g Person *	2. Issuer	Name and '	Ficker or T	Fradin	ø	5. Relationship of	Reporting Per	son(s) to	
GAULKE MICHAEL R Symbol				Name and Ticker or Trading				Issuer			
•			•	ENT INC [EXPO]							
			3 Date of	Date of Earliest Transaction				(Check all applicable)			
149 COMMONWEATH DRIVE(Month/Da 05/30/20(Street)4. If Amer			Day/Year)				X Director	10%	o Owner		
							Officer (give title Other (specify				
								below) below)			
				If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
MENI O DA	RK, CA 94025								Jore than One Re		
MENLOFA	KK, CA 94023							Person			
(City)	(State)	(Zip)	Table	e I - Non-De	rivative S	ecuri	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Da	ate 2A. Dee	med	3. 4. Securities		5. Amount of	6. Ownership	7. Nature of			
Security	(Month/Day/Year			TransactionAcquired (A) or					Indirect		
(Instr. 3)		any (Month)	Day/Voor)	Code				•	(D) or Indirect (I)	Beneficial Ownership	
(Mofilh)			(Instr. 8) (Instr. 3, 4 and 5)				(Instr. 4)				
						(A)		Reported	(Instr. 4)	× /	
						or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	05/30/2018			M (1)	2,021	А	<u>(2)</u>	70,671	I	by Trust	
Stock					_,		_				

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)

Edgar Filing: GAULKE MICHAEL R - Form 4

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Numł	ber	6. Date Exer	cisable and	7. Title and A	Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti			Expiration D		Underlying S		Deriv
Security	or Exercise		any	Code	Securiti	ies	(Month/Day/	Year)	(Instr. 3 and 4	4)	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquire	ed					(Inst
	Derivative				(A) or						
	Security				Dispose	ed of					
	2				(D)						
					(Instr. 3, 4,						
					and 5)						
				Code V	(A) ((D)	Date	Expiration	Title	Amount	
							Exercisable	Date		or	
										Number	
										of	
										Shares	
Restricted									Common		
Stock	<u>(1)</u>	05/30/2018		М	2,	,021	(1)	(2)		2,021	(
Units									Stock		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GAULKE MICHAEL R 149 COMMONWEATH DRIVE MENLO PARK, CA 94025	Х						
Signatures							
By: Wendy Whitehouse For: Michael R.							
Gaulke		06/04/2018					
**Signature of Reporting Person		Date					
E							

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).

Relationships

- (1) Reflects the conversion of shares of vested Restricted Stock Units granted on June 1, 2017 into shares of Common Stock on a 1:1 basis.
- (2) Not applicable.

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.