Edgar Filing: Bridges Lance - Form 4

Bridges Lanc	ce											
Form 4												
January 06, 2	2011											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										PPROVAL		
	UNITED	STATES					NGE C	COMMISSION	ONID	3235-0287		
Check thi	is box		vv as	hington,	D.C. 203	549			Number:	January 31		
if no long		MENT O	Г СНА М	CFS IN 1	RENEFI	CIAI		NEBSHID OF	Expires:	2005		
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Estimated average				
Section 1 Form 4 or				SECON	11125			burden hours per response 0.5				
Form 5		rsuant to S	Section 1	6(a) of the	e Securiti	ies Ex	chang	e Act of 1934,	165p0115e	0.0		
obligation	ns Section 17			• •			U	1935 or Section	n			
may cont See Instru	inue.			vestment	•	- ·						
1(b).												
(Print or Type F	Responses)											
1. Name and Address of Reporting Person [*] _2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Per	son(s) to				
Bridges Lan			2. Issuer Symbol	2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer			
8	ENTROPIC COMMUNICATIONS											
			INC [E]				0110	(Check all applicable)				
(Last)	(First) (Middle)	-	-	ansaction			Director	10%	Owner		
				Date of Earliest Transaction Ionth/Day/Year)				Officer (give title Other (specify				
			01/05/2011					below) below) VP and General Counsel				
	(Streat)		4 10 4	1 (D								
				ndment, Da	-			6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year) Applicable Line _X_Form filed						· · ·	One Reporting Person					
SAN DIEGO	O, CA 92121								Iore than One Re	porting		
		(7.)						Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Dat			· · · · · · · · · · · · · · · · · · ·				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)		on Date, if					Beneficially	Indirect (I) Own	Indirect Beneficial		
(Insu: 5)		any (Month/l	Day/Year)				Ownership					
		× ·						Following		(Instr. 4)		
						(A)		Reported Transaction(s)				
						or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	(
Common Stock	01/05/2011			S (1)	10,000	D	\$ 12.5	87,192	D			
Stock							12.3					
Common	01/05/2011			S (1)	25,000	D	\$ 13	62,192	D			
Stock				~_	,000	_	Ψ I U					

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.

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 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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Bridges Lance 6290 SEQUENCE DRIVE SAN DIEGO, CA 92121			VP and General Counsel					
Signatures								

Lance W. 01/05/2011 Bridges

<u>**</u>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).

(1) The sales reported in the Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 26, 2009.

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.