#### MAXWELL TECHNOLOGIES INC

Form 4

October 31, 2014

# 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)

(City)

1. Title of

Security

(Instr. 3)

1. Name and Address of Reporting Person \*

**ROYAL KEVIN** 

(First) (Middle)

3888 CALLE FORTUNADA

(State)

(Month/Day/Year)

(Street)

SAN DIEGO, CA 92123

2. Issuer Name and Ticker or Trading

Symbol

MAXWELL TECHNOLOGIES INC [MXWL]

(Month/Day/Year) 10/30/2014

4. If Amendment, Date Original

3. Date of Earliest Transaction

Filed(Month/Day/Year)

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

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8)

(Instr. 3, 4 and 5)

Code V Amount (D) Price

(A)

5. Amount of Securities Beneficially Owned Following

Person

Issuer

below)

Director

Applicable Line)

X\_ Officer (give title

Reported Transaction(s)

(Instr. 3 and 4)

Form: Direct (I) (Instr. 4)

6. Ownership

(D) or Indirect Beneficial

Ownership (Instr. 4)

Indirect

7. Nature of

10% Owner

Other (specify

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

SVP, CFO, & Treasurer

6. Individual or Joint/Group Filing(Check

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Estimated average

burden hours per

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

Derivative Security

Conversion or Exercise

(Month/Day/Year) Execution Date, if

(Zip)

Execution Date, if

(Month/Day/Year)

2. Transaction Date 2A. Deemed

any

4. 5. Number of **Transaction**Derivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of 8. 1 **Underlying Securities** (Instr. 3 and 4)

De

Sec

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(Instr. 3) Price of (Month/Day/Year) (Instr. 8) Acquired (A) (In Derivative or Disposed of Security (D) (Instr. 3, 4, and 5) Code V (A) (D) Date **Expiration Title** Amount Exercisable Date or Number of Shares Restricted Common Stock  $$0^{(1)}$ 10/30/2014 A 20,000 (2) (2)20,000 Stock Units

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

**ROYAL KEVIN** 

3888 CALLE FORTUNADA SVP, CFO, & Treasurer

SAN DIEGO, CA 92123

# **Signatures**

Kevin Royal 10/31/2014

\*\*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) Each Restricted Stock Unit (RSU) represents a right to receive one share of Issuer's common stock.
  - This acquisition represents a restricted stock unit with vesting subject to the achievement of Company performance targets by December
- (2) 31, 2016. Depending on the level of performance actually achieved, the number of shares that may vest under this grant will vary. The amount included in the table above represents the maximum number of shares that could vest under the grant.
- (3) These units were received as a grant or award for no consideration.

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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