## Edgar Filing: Fitzgerald Patrick Thomas III - Form 4

Fitzgerald Patrick Form 4 August 22, 2018											
FORM 4	1								OMB A	PPROVA	۱L
-	UNITED	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								3235-	0287
Check this boy if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	STATEM Filed pur Section 17(									Januai average irs per	ry 31, 2005 0.5
(Print or Type Respo	onses)										
1. Name and Addres Fitzgerald Patric	2. Issuer Name <b>and</b> Ticker or Trading Symbol RICHARDSON ELECTRONICS LTD/DE [RELL]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last)	(First) (Middle) 3.			of Earliest T	ransaction		Director 10% Owner				
40 W 267 KESLINGER RD			(Month/Day/Year) 08/20/2018				XOfficer (give titleOther (specify below) below) EVP Healthcare				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting</li> </ul>					
LAFOX, IL 60147 Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	Acquired, Disposed	of, o	r Beneficia	lly Owne	dl
	ansaction Date nth/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Forr (D) (I)	Ownership m: Direct or Indirect tr. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al ip
Reminder: Report or	n a separate line	for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.				
					inforn requi	nation con red to resp iys a curre	spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are orm	e not	EC 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 Amount of	8. I
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Der
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Sec

## Edgar Filing: Fitzgerald Patrick Thomas III - Form 4

Security				<ul><li>(A) or</li><li>Disposed</li><li>(D)</li><li>(Instr. 3, and 5)</li></ul>					
		Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
\$ 9.1	08/20/2018	A		8,965		<u>(1)</u>	08/20/2028	Common Stock	8,965
	\$ 9.1	\$ 9.1 08/20/2018	Code \$ 9.1 08/20/2018 A	Code V \$ 9.1 08/20/2018 A	(D) (Instr. 3, and 5) Code V (A) \$ 9.1 08/20/2018 A 8,965	(D) (Instr. 3, 4, and 5) Code V (A) (D) \$ 9.1 08/20/2018 A 8,965	(D) (Instr. 3, 4, and 5) Code V (A) (D) Date Exercisable \$ 9.1 08/20/2018 A 8,965 (1)	(D) (Instr. 3, 4, and 5) Code V (A) (D) Date Expiration Exercisable Date \$ 9.1 08/20/2018 A 8,965 (1) 08/20/2028	(D) (Instr. 3, 4, and 5) Code V (A) (D) Date Expiration Title Exercisable Date \$ 9.1 08/20/2018 A 8,965 (1) 08/20/2028 Common Stock

## **Reporting Owners**

Reporting Owner Name / Address		ntionships		
	Director	10% Owner	Officer	Other
Fitzgerald Patrick Thomas III 40 W 267 KESLINGER RD LAFOX, IL 60147			EVP Healthcare	
Signatures				
/s/ Robert J. Ben, attorney-in-fa Fitzgerald III	08/20/2018			
<u>**</u> Signature of R		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).
- The stock option was granted on 8/20/2018 pursuant to the Richardson Electronics, Ltd. 2011 Long-Term Incentive Plan. The option
   (1) vests over 5 years with 1/5 of the total number of shares subject to the option vesting on each anniversary of the date of grant, until fully vested.

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.

(In