Edgar Filing: LACEY THOMAS A - Form 5

LACEY TH Form 5	OMAS A									
February 13									PPROVAL	
FORM								OMB	-	
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Check this box if no longer subject Washington, D.C. 20549					Number: Expires:	3235-0362 January 31, 2005			
Form 4 or 5 obligati may conti	to Section 16. Form 4 or Form 5 obligations may continue. ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated a burden hou response	average Irs per			
See Instru 1(b).	Filed purs	suant to Section 1								
Form 3 H Reported Form 4 Transactio Reported	oldings Section 17(a	a) of the Public Un 30(h) of the In	•	•	•			n		
1. Name and A LACEY TH	Address of Reporting F IOMAS A	Symbol	2. Issuer Name and Ticker or Trading Symbol DSP GROUP INC /DE/ [DSPG]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (M	(Month/D	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2017				X Director 10% Owner 0fficer (give title Other (specify			
	161 S. SAN ANTONIO RD, SUITE 10									
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)			
LOS ALTC	94022 OS, CAÂ					-	_X_ Form Filed by Form Filed by I Person	One Reporting P More than One R		
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquired Disposed (Instr. 3, Amount	d (A) o d of (D 4 and (A) or)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock (1)	01/01/2017	Â	A4	4,000 (2)	А	\$0	22,000 <u>(3)</u>	D	Â	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of informationSEC 2270contained in this form are not required to respond unless(9-02)the form displays a currently valid OMB control number.(9-02)

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

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

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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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 13.05	01/01/2017	Â	A4	8,000	Â	(4)	01/01/2027	Common Stock	8,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
LACEY THOMAS A 161 S. SAN ANTONIO RD SUITE 10 LOS ALTOS, CA 94022	ÂX	Â	Â	Â		
Signatures						

/s/ Thomas Lacey	02/13/2018
<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) Represents restricted stock units ("RSUs").
- (2) The RSUs were acquired under the 2012 Equity Incentive Plan. 100% of the RSUs vested on the first year anniversary of the grant.
- (3) Represents 18,000 shares outstanding, and 4,000 unvested RSUs.
- (4) The option fully vested on 01/01/2018.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.