## Edgar Filing: Wallach Sandra - Form 4

Wallach Sand	lra										
Form 4											
November 01	, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
	• UNITE	ED STATES					NGE (	COMMISSION	OMB Number:	3235-0287	
Check this	s box		vv as	nington,	hington, D.C. 20549					January 31,	
if no longer STATEMENT OF CHANG				GES IN BENEFICIAL OWNERSH				NFRSHIP OF	Expires:	2005	
subject to Section 16				SECUR		<b>U</b> III			Estimated average		
	Form 4 or								burden hours per response 0.5		
Form 5	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934.										
obligation may contin		17(a) of the	Public Ut	ility Hole	ding Com	ipany	Act o	of 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestment	Company	y Act	of 19	40			
1(b).											
(Print or Type R	esponses)										
1. Name and Ac	ldress of Report	ing Person <u>*</u>	2. Issuer	Name <b>and</b>	I Ticker or '	Fradin	g	5. Relationship of	f Reporting Per	son(s) to	
Wallach Sandra Symbol Identiv, J								Issuer			
				Inc. [INV	VE]			(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ransaction			(Chec	ck all applicable	5)	
(Month/Da				Day/Year)				Director 10% Owner			
2201 WALNUT AVENUE, SUITE 10/31/20			2018				X Officer (give below)	er (specify			
100								001011)	below) CFO		
				ndment, Date Original				6. Individual or Joint/Group Filing(Check			
				th/Day/Year)				Applicable Line)			
	<b>G</b> + 0 <b>/ 50</b> 0							_X_Form filed by Form filed by M			
FREMONT,	CA 94538							Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-I	Derivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction					5. Amount of	5. Ownership				
Security (Instr. 3)	(Month/Day/Y		on Date, if TransactionAcquired (A) or				Securities	Form: Direct	Indirect Beneficial		
(IIIsu: <i>3</i> )		any (Month/	/Day/Year)	CodeDisposed of (D)Day/Year)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned	_ ,	Ownership	
		× ×	· · ·	~ /	· · ·		·	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				<b>a</b> 1 <b>a</b>	7	or	D ·	(Instr. 3 and 4)			
Common				Code V	<sup>7</sup> Amount 5,000	(D)	Price				
Stock	10/31/2018			А	<u>(1)</u>	А	\$0	122,014 (2)	D		

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)

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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. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own 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				
Wallach Sandra 2201 WALNUT AV FREMONT, CA 94				CFO				
Signatures								
/s/ Sandra Wallach	11/01/2018							
<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) Shares issuable upon settlement of a restricted stock unit award that vests as to 25% of the underlying shares on November 1, 2019 with additional vesting in equal quarterly installments over the following three years.
- (2) Includes an aggregate of 96,250 shares of common stock issuable pursuant to previously reported restricted stock units that have not 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.