Oulman Roxanne Form 4 August 03, 2018

#### FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** Washington, D.C. 20549

**OMB APPROVAL** 

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if no longer subject to Section 16. Form 4 or Form 5

obligations

1(b).

(Last)

Check this box

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

2. Issuer Name and Ticker or Trading

(Print or Type Responses)

1. Name and Address of Reporting Person \* Oulman Roxanne

Symbol

5. Relationship of Reporting Person(s) to

Issuer

CalAmp Corp. [CAMP] (Middle)

(Check all applicable)

C/O CALAMP CORP., 15635

(Street)

(First)

3. Date of Earliest Transaction

(Month/Day/Year) 08/01/2018

X\_ Director 10% Owner Officer (give title Other (specify below)

**ALTON PARKWAY, SUITE 250** 

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

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

**IRVINE, CA 92618** 

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

7. Nature of 6. Ownership Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership (Instr. 4) (Instr. 4)

(A) or

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

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 Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if any

5. Number Transaction of Derivative Expiration Date Code Securities

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

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

Deri

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#### Edgar Filing: Oulman Roxanne - Form 4

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(A) or Disposed of (D) (Instr. 3, 4, and 5)						(Instr	
				Code '	V (A	) (D	) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	(1)	08/01/2018		A	5,6	31	(2)	(2)	Common Stock	5,631	\$
Restricted Stock Units	<u>(1)</u>	08/01/2018		A	5,6	31	(3)	(3)	Common Stock	5,631	\$

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Oulman Roxanne C/O CALAMP CORP. 15635 ALTON PARKWAY, SUITE 250 IRVINE, CA 92618	X						

# **Signatures**

Arnel Melgarejo, Attorney-in-fact 08/03/2018

\*\*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) Not applicable to this transaction. RSUs have no value until all restrictions lapse on the vesting date.
- The restricted stock units vest on the earlier of 8/1/2019 or the date of the 2019 Annual Stockholders meeting. Ms. Oulman elected to defer the receipt of the vested shares until the date she ceases to be a director of CalAmp, pursuant to the Company's Non-qualified Deferred Compensation Plan.
- (3) The restricted stock units vest on 8/1/2021. Ms. Oulman elected to defer the receipt of the vested shares until the date she ceases to be a director of CalAmp, pursuant to the Company's Non-qualified Deferred Compensation Plan.

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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