

POPIELEC MICHAEL D  
Form 4/A  
July 27, 2018

**FORM 4**

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**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. Name and Address of Reporting Person \*  
POPIELEC MICHAEL D

2. Issuer Name and Ticker or Trading Symbol  
ULTRALIFE CORP [ULBI]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
2000 TECHNOLOGY PARKWAY  
  
(Street)

3. Date of Earliest Transaction (Month/Day/Year)  
06/07/2011

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
Director, President and CEO

NEWARK, NY 14513  
  
(City) (State) (Zip)

4. If Amendment, Date Original Filed (Month/Day/Year)  
08/29/2011

6. Individual or Joint/Group Filing (Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**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. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)		
				(A) or (D)	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 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.**

SEC 1474  
(9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)
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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option (right to buy)	\$ 10	06/07/2011	A	200,000					(1)	12/30/2020	Common Stock; \$ .10 par value	200,000

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
POPIELEC MICHAEL D 2000 TECHNOLOGY PARKWAY NEWARK, NY 14513	X			Director, President and CEO

## Signatures

/s/ Michael D. Popielec  
Date: 07/27/2018

\*\*Signature of Reporting Person

## 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) Per Form 4 filed on June 7, 2011 and as amended on August 29, 2011, vesting for this option was to begin on the date the Company's Common Stock first reaches a closing price of \$10.00 for 15 trading days in a 30 trading-day period, with such vesting in equal amounts of 50,000 shares over the four anniversary dates of such date. On July 25, 2018 our Board of Directors, on recommendation of the Compensation and Management Committee and pursuant to the Company's Amended and Restated 2004 Long-Term Incentive Plan, modified this option such that it will fully vest immediately upon the Company's Common Stock first reaching a closing price of \$10.00 for 15 trading days in a 30 trading-day period.

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.