#### Edgar Filing: COMTECH TELECOMMUNICATIONS CORP /DE/ - Form 4

#### COMTECH TELECOMMUNICATIONS CORP/DE/

Form 4

August 06, 2014

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

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**OMB APPROVAL** 

response...

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

Check this box

obligations may continue.

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

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* ROUSE ROBERT G

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

TELECOMMUNICATIONS CORP

(Check all applicable)

(Last)

(First)

(Middle)

3. Date of Earliest Transaction

X\_ Officer (give title below)

Director

10% Owner Other (specify

(Month/Day/Year) 08/04/2014

COMTECH

/DE/ [CMTL]

Senior Vice President

68 SOUTH SERVICE ROAD, **SUITE 230** 

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

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

MELVILLE, NY 11747

(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

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

(A)

Reported Transaction(s)

Code V Amount (D) Price

(Instr. 3 and 4)

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)

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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. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci Expiration Da (Month/Day/Y	te	7. Title and Underlying (Instr. 3 and	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option Right to Buy (1)	\$ 33.94	08/04/2014		A	5,000	08/04/2015	08/04/2024	Common stock par value \$.10 per share	5,000
Stock Option Right to Buy (1)	\$ 33.94	08/04/2014		A	5,000	08/04/2016	08/04/2024	Common stock par value \$.10 per share	5,000
Stock Option Right to Buy (1)	\$ 33.94	08/04/2014		A	5,000	08/04/2017	08/04/2024	Common stock par value \$.10 per share	5,000
Stock Option Right to Buy (1)	\$ 33.94	08/04/2014		A	5,000	08/04/2018	08/04/2024	Common stock par value \$.10 per share	5,000
Stock Option Right to Buy (1)	\$ 33.94	08/04/2014		A	5,000	08/04/2019	08/04/2024	Common stock par value \$.10 per share	5,000

# **Reporting Owners**

Reporting Owner Name / Address	Keiauonsnips					
. 0	Director	10% Owner	Officer	Other		
ROUSE ROBERT G 68 SOUTH SERVICE ROAD, SUITE 230 MELVILLE, NY 11747			Senior Vice President			

Reporting Owners 2

# **Signatures**

Robert G. Rouse 08/05/2014

\*\*Signature of Date
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) Option was granted under the Company's 2000 Stock Incentive Plan in consideration of services to be performed by the reporting person after the date of grant.

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.

Signatures 3