Edgar Filing: Wolff Benjamin G - Form 4

| Wolff Benjami Form 4 | n G | | | | | | | | | | |
|---|--|----------|---|--|--|---------------|------------------|--|---|----------------------|--|
| June 19, 2012 | | | | | | | | | | | |
| FORM | Л | | | | | | | | OMB AF | PPROVAL | |
| | | TATES S | | ITIES A hington, | | | IGE C | COMMISSION | OMB Number: | 3235-0287 | |
| Subject to Section 16. Form 4 or Form 5 obligations may continue Section 17(a) of the | | | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Sectio | | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | | |
| See Instruct 1(b). | ion | 30(n) of | the Inv | vestment | Company | Act | OI 194 | 0 | | | |
| (Print or Type Res | sponses) | | | | | | | | | | |
| Wolff Benjamin G Symbol | | | | | | | 2 | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | Pendrell Corp [PCO] | | | | | (Check all applicable) | | | |
| (Month/E | | | Month/Da | Date of Earliest Transaction onth/Day/Year) /15/2012 | | | | _X_ Director _X_ Officer (give below) | | Owner er (specify | |
| | (Street) | 4. | If Amer | ndment, Dat | te Original | | | 6. Individual or Jo | int/Group Filir | g(Check | |
| KIRKLAND, | WA 98033 | Fi | iled(Mont | h/Day/Year) | | | | Applicable Line) _X_ Form filed by C Form filed by M Person | | | |
| (City) | (State) (| Zip) | T - 1.1. | I Nor D | | • | • | | | | |
| 1.Title of 2 Security ((Instr. 3) | 2. Transaction Date Month/Day/Year) | | d Date, if | 3. Transactio Code | 4. Securiti n(A) or Dis (Instr. 3, 4 | ies Acosposed | quired of (D) | uired, Disposed of 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 | |
| Class A Common 0 Stock | 06/15/2012 | | | М | 22,500 | А | \$ 1.01 | 2,835,454 | 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)

Edgar Filing: Wolff Benjamin G - Form 4

| 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. Transactio Code (Instr. 8) | TransactiorDerivative Code Securities | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|--|---------------------|--|----------------------------|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Stock Option (right to buy) | \$ 1.01 | 06/15/2012 | | М | 22,500 | <u>(1)</u> | 10/01/2018 | Class A Common Stock | 30,000 | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------------------------------------|-------|--|--|
| | Director | 10% Owner | ionships Officer CEO, President | Other | | |
| Wolff Benjamin G 2300 CARILLON POINT KIRKLAND, WA 98033 | Х | | CEO, President | | | |
| Signatures | | | | | | |
| /s/ Timothy M. Dozois, | | 06/19/2 | 012 | | | |

attorney-in-fact

**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) The option is exercisable at the rate of 25% of the shares on each October 1 of 2009, 2010, 2011, and 2012, such that the option will be fully exercisable on October 1, 2012.
- (2) Only represents derivative securities at this exercise price.

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.

L S