Edgar Filing: Vuzix Corp - Form 4

Vuzix Corp											
Form 4											
February 27,	, 2015										
FORM	14	~ ~							OMB AF	PROVAL	
	• • UNITED	STATES			ND EXC D.C. 2054		GE C	OMMISSION	OMB Number:	3235-0287	
Check this box				<u> </u>					Expires: January		
Section 16.				NGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average burden hours per		
Form 4 orresponseForm 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Section <i>See</i> Instruction30(h) of the Investment Company Act of 1940								0.5			
(Print or Type I	Responses)										
1. Name and Address of Reporting Person *2. IssuTravers Paul JSymbol			Symbol	such manne and menter of madning				5. Relationship of Reporting Person(s) to Issuer			
			Vuzix C	Corp [VU2	ZI]			(Check all applicable)			
(Last)	(First) (I	Middle)	3. Date of	f Earliest Tr	ansaction					,	
				nth/Day/Year) 25/2015				_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) President and CEO			
	(Street)		4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
				nth/Day/Year	-			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
ROCHESTI	ER, NY 14623							Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative Se	ecuriti	es Acqu	uired, Disposed of	, or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Executior any (Month/D	n Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
G				Code V	Amount	(A) or (D)	Price \$	Transaction(s) (Instr. 3 and 4)			
Common Stock	02/25/2015			C <u>(1)</u>	698,029	А	2.25 (1)	2,544,212	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. Transactio Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		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 Number Shares
Warrants	\$ 2.25	02/25/2015		C <u>(1)</u>		809,655	08/05/2013	08/05/2018	Common Stock	809,65

Reporting Owners

Reporting Owner Name / Address	Relationships						
the Portung Contract Control Control	Director	10% Owner	Officer	Other			
Travers Paul J 2166 BRIGHTON HENRIETTA TOWNLINE ROAD	Х	Х	President and CEO				
ROCHESTER, NY 14623 Signatures							
eignaturee							

/s/ Paul Travers 02/27/2015 **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) Mr. Travers exercised 809,655 warrants on a cashless basis for 698,029 shares of common stock.

In August 2013, Mr. Travers converted accrued compensation and accrued interest thereon owed to him into 809,655 shares of common
(2) stock and warrants to purchase 809,655 shares of common stock at an exercise price of \$2.25 per share valued at \$2.00 per unit, comprising one share of common stock and one warrant to purchase a share of common stock.

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.