MASIMO CORP Form 4 August 05, 2016

## FORM 4

### OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Expires: January 31,

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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)

Common

Stock

08/03/2016

FITCH SANFORD			2. Issuer Name <b>and</b> Ticker or Trading Symbol			Issuer				
			MASIN	10 COR	P [MASI]		(Check	all applicable	)	
(Last)	(First)	(Middle)	3. Date of	f Earliest T	ransaction					
			(Month/D	ay/Year)				10%		
C/O MASI DISCOVE	MO CORPORA' RY	ΓΙΟΝ, 52	08/03/2	016		below)	fficer (give ti	tleOthe below)	er (specify	
(Street)			4. If Ame	ndment, D	ate Original	6. Individual or Joint/Group Filing(Check				
			Filed(Mor	nth/Day/Yea	ır)		n filed by Or	ne Reporting Per		
IRVINE, C	CA 92618					Person	n filed by Mo	ore than One Rep	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-	Derivative Securities Acc	quired, Di	isposed of,	or Beneficiall	ly Owned	
1.Title of	2. Transaction Dat	e 2A. Deer	ned	3.	4. Securities Acquired	5. Am	ount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution	n Date, if	Transacti	on(A) or Disposed of (D)	Securi	ties	Ownership	Indirect	
(Instr. 3)		any		Code	(Instr. 3, 4 and 5)	Benefi	icially	Form: Direct	Beneficial	

(A)

or

(D)

D

Price

52.621

(2)

Amount

2,000

(Instr. 8)

Code V

 $S^{(1)}$ 

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Month/Day/Year)

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)

Owned

Following

Transaction(s)

(Instr. 3 and 4)

Reported

56,000

(D) or

Indirect (I)

(Instr. 4)

D

Ownership

(Instr. 4)

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

#### Edgar Filing: MASIMO CORP - Form 4

	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transact Code (Instr. 8)	orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	<b>:</b>		Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
FITCH SANFORD C/O MASIMO CORPORATION 52 DISCOVERY IRVINE, CA 92618	X						

## **Signatures**

/s/ David J. Van Ramshorst, Attorney-In-Fact

08/05/2016

\*\*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 shares covered by this Form 4 were sold pursuant to a Rule 10b5-1 Sales Plan dated as of June 10, 2016, which is intended to comply with Rule 10b5-1 promulgated under the Securities Exchange Act of 1934, as amended.
- The price reported in Column 4 represents the weighted average sale price per share. The actual sale prices ranged from a low of \$52.32 (2) per share to a high of \$53.08 per share. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer, or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

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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