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CUBIC CO Form 4 February 12												
FORM	ЛЛ								OMB AF	PPROVAL		
UNITED STATES SECU				URITIES AND EXCHANGE COMMISSION Vashington, D.C. 20549					OMB Number:	3235-0287		
Check this box if no longer subject to Section 16.		TEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES							Expires: Estimated a burden hou	0		
Form 4 c Form 5 obligatio may com <i>See</i> Instr 1(b).	Filed pur ons Section 17(a	a) of the l	Public U		ling Con	npany	y Act of	e Act of 1934, 1935 or Section 0	response	0.5		
(Print or Type]	Responses)											
THOMAS JOHN D Symb			Symbol	Name and			ng	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N	Aiddle)	CUBIC CORP /DE/ [CUB] 3. Date of Earliest Transaction				(Check	eck all applicable)				
(Mo			(Month/D 02/12/2	-				Director 10% Owner X Officer (give title Other (specify below) below) EVP/CFO				
(Street) 4. If A				ndment, Da	-			6. Individual or Joint/Group Filing(Check				
SAN DIEG	O, CA 92123		Filed(Mor	nth/Day/Year)	•			Applicable Line) _X_ Form filed by C Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year)		a Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Pay/Year) (Instr. 8) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial					
				Code V	Amount	(D)	Price	(instr. 5 and 1)		John		
Common Stock	02/12/2016			Р	100	А	\$ 31.48	100	Ι	David Thomas IRA (1)		
Common Stock								1,969.83	I	The John David Thomas 1998 Trust (2)		
Common Stock								14,625	Ι	The Thomas Family		

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Common Stock						1,151.8	3521 I		(<u>3)</u> Cub	9 Trust bic (k) (<u>4)</u>	
Reminder: F	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 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)											
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. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S		Amount of UnderlyingDerivati Security		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno 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								
reporting o where there is the cost	Director	10% Owner	Officer	Other					
THOMAS JOHN D 9333 BALBOA AVENUE SAN DIEGO, CA 92123			EVP/CFO)					
Signatures									
Angela L. Hartley, Attorney-in Thomas	02	02/12/2016							
**Signature of Reporting	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). **

Represents shares held by the John David Thomas IRA, of which the Reporting Person is the Trustee with full voting and disposition (1) rights.

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- (2) Represents shares held by the John David Thomas 1998 Trust, of which the Reporting Person is the Trustee with full voting and disposition rights
- (3) Represents shares held by the Thomas Family 2009 Trust of which the Reporting Person and his spouse are co-trustees with full voting and disposition rights.
- (4) Represents shares held by the Reporting Person's 401(k).

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.