## Edgar Filing: MAZUREK NATHAN - Form 4

MAZUREK NATHAN								
Form 4								
April 04, 2018								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							PPROVAL	
UNITED S					COMMISSION	ONID	3235-0287	
Check this box	W	ashington	i, D.C. 20	549		Number:		
if no longer		NCECIN	DENIER		WNEDGUID OF	Expires:	January 31, 2005	
subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF					Estimated		
Section 16. Form 4 or							burden hours per response 0.5	
	suant to Section	16(a) of tl	he Securit	ties Exchai	nge Act of 1934,	response	. 0.5	
obligations Section 17(s					of 1935 or Sectio	on		
may continue. Section 17(C	30(h) of the 1	•	•	• •				
1(b).			•	•				
(Print or Type Responses)								
1. Name and Address of Reporting I	Person* 2 Law	Nomo on	d Tielen en	Trading	5. Relationship o	of Reporting Per	rson(s) to	
MAZUREK NATHAN		2. Issuer Name <b>and</b> Ticker or Trading Symbol			Issuer			
	•	EER POW	ER SOL	UTIONS				
	INC. [			,	(Che	ck all applicabl	e)	
(Last) (First) (N	Aiddle) 3. Date	of Earliest T	ransaction		X Director	_X_ 10	% Owner	
		/Day/Year)			XOfficer (giv		ner (specify	
C/O PIONEER POWER	04/03/	2018			below) Chief	below) Executive Offi	cer	
SOLUTIONS, INC., 400 KEI	LBY							
STREET 12TH FLOOR								
(Street)	4. If An	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
	Filed(M	onth/Day/Yea	ar)		Applicable Line)			
FORTLEE NIL 07024					_X_ Form filed by Form filed by	One Reporting P More than One R		
FORT LEE, NJ 07024					Person		1 0	
(City) (State)	(Zip) Ta	ble I - Non-	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	ally Owned	
1.Title of 2. Transaction Date	2A. Deemed	3.	4. Securit	ies	5. Amount of	6. Ownership	7. Nature of	
Security (Month/Day/Year)	Execution Date, if					Form: Direct	Indirect	
· · · · · · · · · · · · · · · · · · ·	any (Month/Day/Year)	Code	Disposed (Instr. 3, 4		<b>.</b>	(D) or Indirect (I)	Beneficial Ownership	
	(Wonth/Day/Tear)	(Instr. 8)	(insu: <i>3</i> , -	f allu <i>J</i> )		(I) (Instr. 4)	(Instr. 4)	
				(A)	Reported	. ,	. ,	
				or (A)	Transaction(s) (Instr. 3 and 4)			
		Code V	Amount	(D) Price	(insu: 5 and 4)			
Reminder: Report on a separate line	for each class of se	curities bene	ficially own	ned directly o	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. Transactic Code (Instr. 8)	5. Number ono 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 or Number of Shares
Stock Option (Right to Buy)	\$ 5.6	04/03/2018		A	1,000	04/03/2019 <u>(1)</u>	04/03/2028	Common Stock	1,000

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
		10% Owner	Officer	Other		
MAZUREK NATHAN C/O PIONEER POWER SOLUTIONS, INC. 400 KELBY STREET 12TH FLOOR FORT LEE, NJ 07024	Х	Х	Chief Executive Officer			
Signatures						
/s/ Thomas Klink Attorney-in-Fact for Nathan Mazurek		04/04/2	2018			
**Signature of Reporting Person		Date				
Evolution of Dechanges						

## **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 vests as to 100% on April 3, 2019, subject to the terms and conditions of the Pioneer Power Solution, Inc. 2011 Long-Term Incentive Plan.

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.