AVX Corp Form 4 January 23, 2014

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

3235-0287 January 31,

0.5

Expires: 2005

**OMB APPROVAL** 

Estimated average burden hours per response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

SECURITIES

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

1(b).

(Print or Type Responses)

1. Name and A	Symbol	Issuer Name and Ticker or Trading  Symbol  AVX Corp [AVX]				5. Relationship of Reporting Person(s) to Issuer				
(Last)  1 AVX BO	(First) (		of Earliest T /Day/Year) /2014	ransaction			_X_ Director _X_ Officer (gi below)		0% Owner Other (specify	
	(Street)	Filed(M	nendment, D lonth/Day/Yea		al		6. Individual or Applicable Line) _X_ Form filed b	y One Reporting	Person	
FOUNTAI	N INN, SC 29644	L					Person	More than One	Reporting	
(City)	(State)	(Zip) Ta	ble I - Non-l	Derivative	Secu	rities Aco	quired, Disposed	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership Indirect Form: Beneficial Oirect (D) Ownership or Indirect (Instr. 4)	
Common Stock	01/21/2014	01/22/2014	Code V	Amount 24		Price \$ 13.56	(Instr. 3 and 4) 41,585	I	By Retiremen Plan Trustees	
Reminder: Re	port on a separate line	e for each class of se	curities bene	Perso	ons w	ho resp	indirectly.  ond to the colle ined in this form and unless the fo	n are not	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title a		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amount		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	_	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	,				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					4, and 5)						
					4, and 3)						
								A	mount		
						D.	E	OI	r		
							Expiration	Title N			
							Date	01			
				Code V	(A) (D)				hares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GILBERTSON JOHN S 1 AVX BOULEVARD FOUNTAIN INN, SC 29644	X		CEO and President				

## **Signatures**

Kurt P. Cummings, attorney-in-fact

01/23/2014

\*\*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).

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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