AVX Corp Form 4 August 08, 2016

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

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

Check this box

SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

Form 5 biled pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations may continue. See Instruction Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 17(b) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and THOMAS	Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol AVX Corp [AVX]			5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)	(First)	Middle) 3. Date of	of Earliest T	Transaction	(Cil	сск ин иррнси	<i>(</i>		
1 AVX BO	OULEVARD	(Month/ 08/04/2	Day/Year) 2016		DirectorX Officer (gi below) SR VP of		` 1		
	(Street)	4. If Am	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
FOUNTA	IN INN, SC 29644	· ·	onth/Day/Yea	ar)	Applicable Line) _X_ Form filed by Form filed by Person				
(City)	(State)	(Zip) Tak	ole I - Non-	Derivative Securities Acc	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	3. Transacti Code	4. Securities Acquired or(A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially	6. Ownership Form:	7. Nature of Indirect Beneficial		

1.Title of	2. Transaction Date		1				5. Amount of	6.	7. Nature of
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	(Instr. 3,	4 and (A) or	(5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership (Instr. 4)
Common Stock	08/04/2016	08/05/2016	Code V	Amount 30	(D)	Price \$ 13.38	19,551	I	By Retirement Plan Trustees
Common Stock	08/04/2016	08/05/2016	A	27	A	\$ 13.38	19,578	I	By Retirement Plan Trustees

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 (9-02)

#### Edgar Filing: AVX Corp - Form 4

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title a	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		ionNumber Expiration Date		Amount	of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									mount		
						Date	Expiration	01 Title N			
						Exercisable	Date	Title Number			
				C 1 W	(A) (D)			of			
				Code V	(A) (D)			S	hares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

THOMAS KEITH 1 AVX BOULEVARD FOUNTAIN INN, SC 29644

SR VP of Corporate Development

## **Signatures**

Kurt P. Cummings,

attorney-in-fact 08/08/2016

\*\*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).

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.

Reporting Owners 2