Olson Jon A Form 3 January 24, 2018 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average burden hours per Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response... 0.5

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)

| 1. Name and Address of Reporting Person <u>*</u> Olson Jon A | | | 2. Date of Event Requiring Statement (Month/Day/Year) | | 3. Issuer Name and Ticker or Trading Symbol Mellanox Technologies, Ltd. [MLNX] | | | | |
|--|-------------------|------------------|---|--|--|--|---------------------------|---|--|
| (Last) | (First) | (Middle) | 01/17/2018 | | 4. Relationship of Reporting Person(s) to Issuer | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| 20000 BELL SARATOGA | (Street) | | | | Director Officer (give title below | all applicable) X 10% X Othe v) (specify belo ation of Respon | Owner r ow) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | |
| (City) | (State) | (Zip) | | Table I - N | lon-Derivat | ive Securiti | es Be | neficially Owned | |
| 1.Title of Securi (Instr. 4) | ity | | | 2. Amount of Beneficially (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nat Owne (Instr. | 1 | |
| Ordinary Sha per share (1) | res, nomin | al value N | IS 0.0175 | 0 | | D | Â | | |
| Reminder: Repo owned directly c | - | ate line for eac | ch class of secu | urities benefici | ially S | EC 1473 (7-02 | 2) | | |
| | inform require | ation conta | oond to the c ined in this f nd unless the IB control nu | iorm are not e form displa | | | | | |

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

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | Securities Underlying Derivative Security (Instr. 4) | 4. Conversion or Exercise Price of Derivative | 5. Ownership Form of Derivative Security: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|--|--|---|---|---|
| | | Title | Derivative Security | Security: Direct (D) | |

Edgar Filing: Olson Jon A - Form 3

| Date | Expiration | Amount or | or Indirect |
|-------------|------------|-----------|-------------|
| Exercisable | Date | Number of | (I) |
| | | Shares | (Instr 5) |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|--------------------|-----------|---------|------------------------------|--|--|
| F8 | Director 10% Owner | | Officer | Other | | |
| Olson Jon A 20000 BELLA VISTA AVENUE SARATOGA, CA 95070 | Â | ÂX | Â | See Explanation of Responses | | |
| Signatures | | | | | | |
| Jon A. Olson; By: /s/ Jeffrey C. Smit Fact | in 0 | 1/24/2018 | | | | |
| ** Signature of Reporting Person | | Date | | | | |
| Fundamention of Deemonsoon | | | | | | |

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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).

The Reporting Person may be deemed to be a member of a Section 13(d) group that beneficially owns in the aggregate more than 10% of the Issuer's outstanding Ordinary Shares. The Reporting Person disclaims beneficial ownership of such Ordinary Shares except to the

(1) and issues southanding ordinary shares. The Reporting Person discrams beneficial ownership of such Ordinary Shares except to the extent of his pecuniary interest therein, and this report shall not be deemed to be an admission that the Reporting Person is the beneficial owner of such Ordinary Shares for purposes of Section 16 or for any other purpose.

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.