SEC Form 4	
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### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burg	den									
hours per response.	0.5									

		or Section 30(h) of the Investment Company Act of 1940				
1 0		2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>VICOR CORP</u> [ vicr ]			erson(s) to Issuer 10% Owner	
(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/17/2016		Officer (give title below)	Other (specify below)	
	01810	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	Form filed by One Reporting Person		
MA			X			
				Form filed by More th Person	an One Reporting	
(State)	(Zip)					
	(First) E ROAD MA	MA 01810	2. Issuer Name and Ticker or Trading Symbol   VICOR CORP   (First)   (Middle)   2. Issuer Name and Ticker or Trading Symbol   VICOR CORP   (First)   (Middle)   2. Issuer Name and Ticker or Trading Symbol   VICOR CORP   (First)   (Middle)   3. Date of Earliest Transaction (Month/Day/Year)   06/17/2016   4. If Amendment, Date of Original Filed (Month/Day/Year)   MA   01810	2. Issuer Name and Ticker or Trading Symbol 5. Relation (Check Construction)   ON H ALLEN 2. Issuer Name and Ticker or Trading Symbol 5. Relation   (First) (Middle)   2. ROAD 3. Date of Earliest Transaction (Month/Day/Year) 6. Individentiation   MA 01810 6. Individentiation	2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person*   DN H ALLEN 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person*   (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person*   MA 01810 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Fili   X Form filed by One Reporting Person X Form filed by More the Person	

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)

### 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. Transa Code ( 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non Qualified Stock Option	\$10.61	06/17/2016		A		4,713		(1)	06/17/2026	Common Stock	4,713	\$0	36,378	D	

Explanation of Responses:

1. Granted under the Company's Amended and Restated 2000 Stock Option and Incentive Plan and vest over a five year period.

/s/James A. Simms Attorney in 06/20/2016 Fact for H. Allen Henderson

Date

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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.

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 Number.