FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL
I	OMB Number:	3235-0287
	Estimated average burde	en
	hours per response:	0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

							` '											
1. Name and Address of Reporting Person* SIMMS JAMES A					2. Issuer Name <b>and</b> Ticker or Trading Symbol VICOR CORP [ vicr ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) (First) (Middle) 25 FRONTAGE RD.					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2017									Officer (give title Other (specibelow) below)  CFO and Secretary			specify	
(Street) ANDOVER MA 01810				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person					
(City) (State) (Zip)													Person					
	Tak	le I - No	on-Der	ivativ	e Se	curit	ties Ac	quired	, Di	sposed o	f, or Be	neficia	ally Ov	ned				
Date					Execution Date,		Transaction Disposed Of Code (Instr.		es Acquired (A) or Of (D) (Instr. 3, 4 and 5)		5) Se Be Or	5. Amount of Securities Beneficially Owned Following		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	Tr	Transaction(s) (Instr. 3 and 4)				(1113411 4)
Stock			02/28	3/2017	017			M		3,541	A	\$5.3	85	48,541			D	
Common Stock 02/28/20				3/2017	017			S		3,541	D	\$16.0	921	45,000			D	
Common Stock 02/28/20					017			M		11,459	A	\$5.3	85	56,459			D	
Stock			02/28	3/2017	017			S		11,459	D	\$16.1	388	45,000			D	
Common Stock 02/28/20					017			M		10,000	A	\$6.2	29	55,000			D	
Common Stock 02/28/20					017			S		10,000	D	\$16.1	388	45,000			D	
Common Stock 02/28/20					017		M		7,541	A	\$8.38		52,541			D		
Common Stock 02/28/20				3/2017	017		S		7,541	D	\$16.1	388	45,000			D		
	•	Table II												ed				
2. 3. Transaction 3A. Deeme Execution or Exercise (Month/Day/Year) if any		ned 4. n Date, Transacti Code (Ins		ction	5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun of Securities Underlying		Derivative Security		derivative Securities Beneficial Owned Following Reported	Ownersh Form: Direct (D or Indire (I) (Instr.		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	or Numbe of	r					
\$5.35	02/28/2017			М			3,541	(1)		05/14/2023	Common Stock	3,541	\$	0	144,87	1	D	
\$5.35	02/28/2017			М			11,459	(1)		05/14/2023	Common Stock	11,45	9 \$	0	133,412		D	
\$6.29	02/28/2017			М			10,000	06/17/20	)14	06/17/2023	Common Stock	10,00	0 \$	0	123,41	2	D	
\$8.38	02/28/2017			M			7,541	06/17/20	)16	06/17/2023	Common Stock	7,541	\$	0	115,87	1	D	
	S JAMES  (Final State of Particular Stock	S JAMES A  (First) VTAGE RD.  ER MA  (State)  Tab  Security (Instr. 3)  Stock  Stock	(First) (Middle) NTAGE RD.  ER MA 01810  (State) (Zip)  Table I - No Security (Instr. 3)  Stock	S JAMES A   (First)   (Middle)   (Middle)   (State)   (Zip)   (State)   (Zip)   (Month/l)   (Stock   02/28   Stock   02/28   Stock   02/28   Stock   Stock	S JAMES A	Code   Name   Same   Same	Conversion or Exercise Price of Derivative Security (Month/Day/Year)   Stock   02/28/2017   Stock   02/28/2017	Code   Conversion of Exercise   Conversion   Code   Code	VICOR CORP   vicr	Code   Name   Name	Code	A		Check all   X   Cornersion   Conversion   Conversion	Circle   C	Control   Cont	Check	Control   Cont

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

/s/Richard J. Nagel Jr. Attorney 03/02/2017 in Fact for James A. Simms

\*\* Signature of Reporting Person

Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).