## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|             |      |       |

| Check this box if no longer subject to<br>Section 16. Form 4 or Form 5 | STATEMENT OF CHANGI            |  |  |  |  |  |  |
|--|--------------------------------|--|--|--|--|--|--|
| obligations may continue. See Instruction 1(b).                        | Filed pursuant to Section 16(a |  |  |  |  |  |  |

ES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>SIMMS JAMES A</u> |   |            |                |   | 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 |   |             |  |   |  |
|---|---|------------|----------------|---|--|---|---------|--|---------------------|-------|---|-----------------|---|---|---|-------------|--|---|--|
|   | (Fi<br>CORPORA'<br>VTAGE RD   | TION       | (Middle)       |   |  | 3. Date of Earliest Transaction (Month/Day/Year) 06/19/2015 |         |  |                     |       |   |                 |   | X   | Officer<br>below)   | (give title | Other (s<br>below)<br>retary   | specify   |  |
| (Street) ANDOV (City)   |   |            | 01810<br>(Zip) |   | 4. If  | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |         |  |                     |       |   |                 |   | 6. Indi<br>Line)<br>X   | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person |             |  |   |  |
|   |   | Tab        | le I - Non     | -Deriv                                  | ative  | e Se  | curitie | s Ac   | quired, [           | Disp  | osed o  | of, or Be       | nefic                                       | ially   | Owned   | I           |  |   |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D      |   |            |                |   | Execution Date,  |   |         | Code (In<br>8)   | str.                | r. 5) |   |                 | and Securities Beneficition Owned I Reporte |   | es Forr<br>ially (D) o<br>Following (I) (II   |             | n: Direct<br>r Indirect<br>istr. 4)                                      | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |   |            |                |   |  | Code  | v       | Amount   | (A) or (D)          |       | ce  |                 | (Instr. 3 and 4)                            |   |   |             |  |   |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g., puts, calls, warrants, options, convertible securities) |            |                |   |  |   |         |  |                     |       |   |                 |   |   |   |             |  |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | Derivative Conversion Date Execution Date,<br>Security or Exercise (Month/Day/Year) if any  |            | Date,          | 4.<br>Transaction<br>Code (Instr.<br>8) |  | n of  |         | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                     |       | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Secur<br>(Instr. 3 and 4) |                 | S<br>(I                                     | . Price of<br>perivative<br>security<br>nstr. 5)  | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4)               | s<br>lly    | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>t (Instr. 4)                           |  |
|   |   |            |                |   | Code   | v   | (A)     | (D)  | Date<br>Exercisable |       | xpiration<br>ate  | Title           | Amou<br>or<br>Numb<br>of<br>Share           | er  |   |             |  |   |  |
| Non<br>Qualified<br>Stock<br>Option                           | \$13.42   | 06/19/2015 |                |   | A  |   | 3,726   |  | (1)                 | 06    | 5/19/2025   | Common<br>Stock | 3,72  | 26  | \$0   | 143,69      | 9  | 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/Kemble D. Morrison

Attorney in fact for James A.

**Simms** 

\*\* Signature of Reporting Person

Date

06/22/2015

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

- $^{\star}$  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.