

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

| OMB APPROVAL                                 |           |
|--|-----------|
| OMB Number:                                  | 3235-0287 |
| Estimated average burden hours per response: | 0.5       |

|  |   |  |
|--|---|--|
| 1. Name and Address of Reporting Person*<br><u>CARLSON JASON</u><br><br>(Last) (First) (Middle)<br><u>25 FRONTAGE RD.</u><br><br>(Street)<br><u>ANDOVER MA 01810</u><br><br>(City) (State) (Zip) | 2. Issuer Name and Ticker or Trading Symbol<br><u>VICOR CORP [ vicr ]</u> | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br><br><input checked="" type="checkbox"/> Director 10% Owner<br><br>Officer (give title below) Other (specify below) |
|  | 3. Date of Earliest Transaction (Month/Day/Year)<br><u>06/08/2017</u>     |  |
|  |   | 6. Individual or Joint/Group Filing (Check Applicable Line)<br><br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br><br>Form filed by More than One Reporting Person    |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) |   | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) |            |           | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 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     |   |  |   |
| Common Stock                    | 06/08/2017                           |  | M                              |   | 5,411   | A          | \$6.29    | 5,411   | D  |   |
| Common Stock                    | 06/08/2017                           |  | S                              |   | 5,411   | D          | \$20.089  | 0   | D  |   |
| Common Stock                    | 06/08/2017                           |  | M                              |   | 4,807   | A          | \$5.67    | 4,807   | D  |   |
| Common Stock                    | 06/08/2017                           |  | S                              |   | 4,807   | D          | \$20.089  | 0   | D  |   |
| Common Stock                    | 06/09/2017                           |  | M                              |   | 1,709   | A          | \$8.05    | 1,709   | D  |   |
| Common Stock                    | 06/09/2017                           |  | S                              |   | 1,709   | D          | \$20.4593 | 0   | D  |   |

**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. Transaction Code (Instr. 8) |   | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |       | 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 |
| Non Qualified Stock Option                 | \$6.29   | 06/08/2017                           |  | M                              |   |  | 5,411 | (1)  | 06/17/2023      | Common Stock  | 5,411                                      | \$0  | 32,457  | D  |       |
| Non Qualified Stock Option                 | \$5.67   | 06/08/2017                           |  | M                              |   |  | 4,807 | (2)  | 06/21/2023      | Common Stock  | 4,807                                      | \$0  | 27,650  | D  |       |
| Non Qualified Stock Option                 | \$8.05   | 06/09/2017                           |  | M                              |   |  | 1,709 | (3)  | 06/20/2024      | Common Stock  | 1,709                                      | \$0  | 25,941  | D  |       |

**Explanation of Responses:**

- Granted on 6/17/2013 under the Company's Amended and Restated 2000 Stock Option and Incentive Plan, vesting over a five year period.
- Granted on 6/21/2013 under the Company's Amended and Restated 2000 Stock Option and Incentive Plan, vesting over a five year period.
- Granted on 6/20/2014 under the Company's Amended and Restated 2000 Stock Option and Incentive Plan, vesting over a five year period.

/s/Richard J. Nagel Jr. Attorney 06/12/2017  
in Fact for Jason Carlson

\*\* Signature of Reporting Person Date

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.