FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

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

| | tion 1(b). | iuc. See | | Filed | pursua or Se | ant to S ection 3 | ection 80(h) o | 16(a) f the l | of the nvestm | Securi nent Co | ties Exchang mpany Act o | e Act of f 1940 | of 1934 | | | nours | per re | esponse: | 0.5 | |
|--|--|----------|--------------|---|--|--|-------------------|---|---------------|--|-----------------------------|--------------------|---|--|---|--|---|---|---|--|
| Name and Address of Reporting Person* Tuozzolo Claudio | | | | | 2. Issuer Name and Ticker or Trading Symbol VICOR CORP [vicr] | | | | | | | | | 5. Relationship of Reporting Person(s) to Is (Check all applicable) X Director 10% Ox | | | | | | |
| (Last) (First) (Middle) 25 FRONTAGE ROAD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2020 | | | | | | | | X | Officer (give title below) Corp. Vice P | | | Other (specify below) President | | | | |
| (Street) ANDOV (City) | | | 1810 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | . Indivine) | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Table | I - N | on-Deriva | tive S | Secui | rities | Acc | quire | d, Dis | posed of | , or E | Benefic | ially | Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | Year) | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | | and 5) Securi Benefi Owner | | cially I 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 | | Reported Transaction(s) (Instr. 3 and 4) | | | | (11150.4) | |
| Common Stock 12/15/20 | | | | |)20 | | | S | | 1,770 | D | \$91.3 | 695 | 53,481 | | | 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) | tive Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any | | | | | 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) | | rice of ivative urity tr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form: Direct (I or Indire (I) (Instr | Ownership | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | or Number of Shares | | | | | | | |

Explanation of Responses:

/s/Richard J. Nagel Jr. Attorney in fact for Claudio **Tuozzolo**

12/16/2020

** 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.