Edgar Filing: Bozzini Anthony - Form 4

Bozzini Antl	nony												
Form 4													
May 06, 200	_												
FORM	14		GECUI		ND EV	TT A 1		OMMISSION	OMB APPROVAL				
	UNITED	SIAIES		ECURITIES AND EXCHANGE COM Washington, D.C. 20549				OMMINISSION	OMB Number:	3235-0287			
Check th if no long	ar.								Expires:	January 31,			
subject to		IENT OI	F CHAN			CIA	LOWN	NERSHIP OF	Estimated a	2005 average			
Section 1 Form 4 o				SECUR	ITIES					den hours per			
Form 5		suant to S	Section 1	6(a) of the	- Securit	ies F	xchange	e Act of 1934,	response				
obligatio	ns Section 17(•	1935 or Sectior	1				
may cont See Instru	inue.			vestment									
1(b).					-								
	`												
(Print or Type I	Responses)												
1. Name and A	ddress of Reporting 1	Person <u>*</u>	2. Issue	r Name and	Ticker or	Tradir	ıσ	5. Relationship of	Reporting Pers	on(s) to			
Bozzini Ant		orting Person 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer											
			PIXEL	WORKS,	INC [PX	LW]		(Chaol	haalt all applicable)				
(Last)	(First) (M	/liddle)	3. Date of	f Earliest Tr	ansaction			(Cheer	eck all applicable)				
	6766 5 W CITER DOOTED 05/05/2007			Month/Day/Year)				Director		Owner			
				X_ Officer (give title Other (specify below) below)									
FERRY RD	, SUITE 101							EVP, Sal	les and Market	ing			
	(Street)		4. If Ame	nendment, Date Original				6. Individual or Joint/Group Filing(Check					
	Filed(• •				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
PORTLAND, OR 97224													
FURILAN	D, OK 97224							Person					
(City)	(State)	(Zip)	Tab	e I - Non-D	erivative	Securi	ities Acqu	uired, Disposed of	, or Beneficial	y Owned			
1.Title of	2. Transaction Date	2A. Deen	ned	3.	4. Securit		-	5. Amount of	6.	7. Nature of			
Security									Ownership Form: Direct	Indirect Papafiaial			
(Instr. 3)		any (Month/D	Day/Year)	Code (Instr. 8)	(Instr. 3, 4	+ anu .))	Ownership					
			•					Following	Indirect (I)	(Instr. 4)			
						(A)		Reported Transaction(s)	(Instr. 4)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)					
Common	05/05/2000	0510512	000				\$	20.000	D				
Stock	05/05/2009	05/05/2	009	Р	10,000	А	0.841	30,000	D				

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Non-Qualified Stock Option (right to buy)	\$ 0.6					<u>(1)</u>	03/23/2019	Common Stock	100,000
Non-Qualified Stock Option (right to buy)	\$ 2.42					(2)	06/05/2018	Common Stock	66,666

Reporting Owners

Director 10% Owner Officer Other		Relationships			Reporting Owner Name / Address	
	er	Officer	10% Owner	Director		
Bozzini Anthony16760 SW UPPER BOONES FERRY RDSUITE 101PORTLAND, OR 97224		EVP, Sales and Marketing			16760 SW UPPER BOONES FERRY RD SUITE 101	16760 Suite
Signatures					Signatures	Sigr
By: Shelley Hilderbrand For: Anthony 05/06/2009			05/06/2009	(•
***Signature of Reporting Person Date			Date		<u>**</u> Signature of Reporting Person	

Explanation of Responses:

- * 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).
- (1) Becomes exercisable on a monthly basis over 3 years, commencing the last day of the month of the date of grant.
- (2) $\frac{25\%}{\text{basis thereafter over three years.}}$

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.