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Richardson	Clent									
Form 4	0 2000									
FORN	ЛЛ	STATES		RITIES A			NGE	COMMISSIO		PPROVAL 3235-0287
Check t if no lou subject Section Form 4 Form 5 obligati may con <i>See</i> Inst 1(b).	nger to 16. or Filed pur ons ntinue. ruction	rsuant to S (a) of the I	CHAN ection 1 Public U	NGES IN SECUI	BENEF RITIES ne Securi ding Cor	ICIAI ties Ex npany	char Act	VNERSHIP OI age Act of 1934 of 1935 or Secti 940	Expires: Estimated burden hol response	urs per
1. Name and Richardsor	Address of Reporting Clent	Person [*]	Symbol	er Name an e RSION C			g	Issuer	of Reporting Per	
(Last) C/O IMMH LANE	(First) (ERSION CORP, 8	Middle) 01 FOX		of Earliest T Day/Year) 2009	ransaction			X Director X Officer (g below)	104	% Owner her (specify
SAN JOSE	(Street) 5, CA 95131			endment, D onth/Day/Yea	-	ıl		Applicable Line) _X_ Form filed b	Joint/Group Fili y One Reporting F y More than One R	erson
(City)	(State)	(Zip)	Tab	la I Non I	Dorivotivo	Socurit	tios A	cquired, Disposed	of or Bonoficio	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	-	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D) 4 and 5) (A) or		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
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	Perso	ns wh	o res	r indirectly. pond to the colle ained in this forr		SEC 1474 (9-02)

information contained in this form are not (9-02 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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Date	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security	Secu

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8	8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur (Instr	ities . 3 and 4)	(Instr. 5)	Bene Own Follo Repo Trans (Instr	
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Richardson Clent C/O IMMERSION CORP 801 FOX LANE SAN JOSE, CA 95131	Х		President & CEO						
Signatures									
/s/ Clent Richardson by Ben Ri Attorney-in-Fact	chter,		12/09/2009						
<u>**</u> Signature of Reporting	Person		Date						

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).

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.