DuFour Janice M Form 5 February 12, 2018

OMB APPROVAL FORM 5 **OMB**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL burden hours per

Form 4 or Form 5 obligations OWNERSHIP OF SECURITIES may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer DuFour Janice M Symbol UNIVERSAL DISPLAY CORP \PA\ (Check all applicable) [OLED] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) Director 10% Owner _ Officer (give title X Other (specify (Month/Day/Year) below) below) 12/31/2017 VP of Tech Commercialization C/O UNIVERSAL DISPLAY

CORPORATION, Â 375 PHILLIPS BLVD.

> (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting

> > Filed(Month/Day/Year)

(check applicable line)

3235-0362

response...

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1.0

EWING, NJÂ 08618

X Form Filed by One Reporting Person Form Filed by More than One Reporting

		10.500							
(City)	(State)	(Zip) Tak	ole I - Non-De	rivative 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. Securir or Dispos (Instr. 3,	sed of	` '	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	06/30/2017	Â	J <u>(1)</u>	12	A	\$ 73.185	57,542	D	Â
Common Stock	09/30/2017	Â	J <u>(1)</u>	8	A	\$ 92.8625	57,550	D	Â
Common Stock	12/31/2017	Â	J <u>(1)</u>	8	A	\$ 109.5225	57,558	D	Â

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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.

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

1. Title	e of 2.		3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
Deriva	tive Conv	ersion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative
Securit	ty or Ex	ercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr.	3) Price	of		(Month/Day/Year)	(Instr. 8)	Derivative	•		Secur	ities	(Instr. 5)
	Deriv	ative				Securities			(Instr.	3 and 4)	
	Secui	rity				Acquired					
						(A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
										Amount	
							Date	Expiration		or	
							Exercisable Date	Title Number			
										of	
						(A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address	жинра						
	Director	10% Owner	Officer	Other			

DuFour Janice M C/O UNIVERSAL DISPLAY CORPORATION 375 PHILLIPS BLVD. EWING, NJÂ 08618

 \hat{A} \hat{A} \hat{A} VP of Tech Commercialization \hat{A}

Relationshins

Signatures

/s/ Janice M. 02/12/2018 DuFour

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These shares were acquired under the Universal Display Corporation Employee Stock Purchase Plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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