#### Edgar Filing: HARRIS CORP /DE/ - Form 4

HARRIS COR Form 4 August 10, 201 <b>FORM</b> Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	16 <b>4</b> UNITED box <b>STATE</b> Filed pu Section 17	MENT O	Wa F CHAN Section 1 Public U	shington NGES IN SECU 16(a) of t ftility Ho	n, D.C. 20 N BENEF RITIES he Securi Iding Con	)549 TCLA ties H npan	<b>LOWN</b> Exchange	OMMISSION ERSHIP OF Act of 1934, 935 or Section	OMB Number: Expires: Estimated a burden hour response		
(Print or Type Res	sponses)										
FOX SHELDON J Syml								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month/				nte of Earliest Transaction nth/Day/Year) 98/2016				Director 10% Owner XOfficer (give title Other (specify below) below) SVP, Integration & Engineering			
				-				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu		red, Disposed of,	or Beneficiall	y Owned	
	Transaction Date Month/Day/Year)		Date, if	Code (Instr. 8)	oror Dispos (Instr. 3, 4	ed of ( 4 and 3 (A) or	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)	
Common Stock, Par Value \$1.00	8/08/2016			Code V M	Amount 17,700	(D) A	Price \$ 35.04	62,060.2	D		
Common Stock, Par Value \$1.00	8/08/2016			S	17,700	D	\$ 88.0189 ( <u>1)</u>	44,360.2 <u>(2)</u>	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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#### 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 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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercis Expiration Dat (Month/Day/Y	e	7. Title and A Underlying S (Instr. 3 and 4	Secur
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nui of S
Non-Qualified Stock Option (Right to Buy)	\$ 35.04	08/08/2016		М	17,700	08/28/2012	08/28/2019	Common Stock, Par Value \$1.00	17

### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
FOX SHELDON J HARRIS CORPORATION 1025 WEST NASA BOULEVARD MELBOURNE, FL 32919			SVP, Integration & Engineering			
0!						

## Signatures

/s/ Sheldon J.	
Fox	08/10/2016
<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).
- The 17,700 shares were sold at a weighted average sale price of \$89.0189. The prices actually received ranged from \$88.86 to \$89.36.
   (1) The reporting person will provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.

Aggregate of 44,360.20 shares listed in Column 5 of Table I includes: (a) 6,275 restricted shares previously reported; (b) 99.04 shares acquired through the Harris Corporation 401(k) Retirement Plan ("Plan") from 9/9/15 through 5/27/16; (c) 826.30 shares acquired

(2) adquired through the Harris corporation 401(k) Rediction 1 and (1 and 1 from 5/5/15 through 3/21/15, (c) 522.55 shares adquired through a broker dividend reinvestment plan from 9/24/15 through 6/13/16; and (d) a reduction of 1.88 shares due to rounding of previous reports by the Plan's record keeper.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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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.