

Dysard Jeffrey Michael  
 Form 4  
 February 22, 2019

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Dysard Jeffrey Michael

2. Issuer Name and Ticker or Trading Symbol  
 CABOT MICROELECTRONICS CORP [CCMP]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
 870 N. COMMONS DRIVE  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 02/21/2019

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
 VP and Pres. of Perf. Material

AURORA, IL 60504

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 \_\_\_\_ Form filed by More than One Reporting Person

(City) (State) (Zip)

**Table I - Non-Derivative 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. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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)
			Code	V Amount (A) or (D) Price			
Common Stock	02/21/2019		M	1,213 A \$ 46.45	6,533.4506	D	
Common Stock	02/21/2019		S <sup>(1)</sup>	1,213 D \$ 104,9315	5,320.4506	D	
Common Stock	02/21/2019		M	1,543 A \$ 42.37	6,863.4506	D	
Common Stock	02/21/2019		S <sup>(1)</sup>	1,543 D \$ 104,9315	5,320.4506	D	
Common Stock	02/21/2019		S	377.451 D \$ 104.52	4,942.9996	D	

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

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(9-02)

**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. 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 Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares
Stock Options (Right to Buy)	\$ 46.45	02/21/2019		M	1,213	12/03/2015 <sup>(2)</sup> 12/03/2024	Common Stock	1,213
Stock Options (Right to Buy)	\$ 42.37	02/21/2019		M	1,543	12/03/2016 <sup>(3)</sup> 12/03/2025	Common Stock	1,543

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Dysard Jeffrey Michael 870 N. COMMONS DRIVE AURORA, IL 60504			VP and Pres. of Perf. Material	

## Signatures

/s/ H. Carol Bernstein (Power of Attorney) 02/22/2019  
\*\*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).
- (1) Sale to cover exercise price of, and taxes related to, cashless exercise of stock options.

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- (2) 2014 (FY15) Non-Qualified Stock Option Grant Vesting Schedule: 25% 12/03/2015, 25% 12/03/2016, 25% 12/03/2017, 25% 12/03/2018.
- (3) 2015 (FY16) Non-Qualified Stock Option Grant Vesting Schedule: 25% 12/03/2016, 25% 12/03/2017, 25% 12/03/2018, 25% 12/03/2019.

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.