## Edgar Filing: SOLITRON DEVICES INC - Form 3

#### SOLITRON DEVICES INC Form 3 January 16, 2015 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549 OMB

### **INITIAL STATEMENT OF 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 <u>*</u> CHISTE JOHN F			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol SOLITRON DEVICES INC [SODI]			
(Last)	(First)	(Middle)	01/12/2015	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Origin Filed(Month/Day/Year)		
C/O SOLITRON DEVICES, INC., 3301 ELECTRONICS				(Check all applicable)			
WAY	(Street)			_X_Director10% Owner OfficerOther	6. Individual or Joint/Group		

#### WEST PALM BEACH, FLÂ 33407

(City) (State)

1. Title of Security (Instr. 4)

1. Title of (Instr. 4)

#### Table I - Non-Derivative Securities Beneficially Owned

Ownership

Direct (D) or Indirect (I) (Instr. 5)

SEC 1473 (7-02)

Form:

2. Amount of Securities Beneficially Owned (Instr. 4)

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Reporting Person

Person

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

(Zip)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

f Derivative Security	erivative Security 2. Date Exercisa Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)			5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

Officer Other (give title below) (specify below)

3.

ginal

Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

\_ Form filed by More than One

**OMB APPROVAL** 

3235-0104 Number: January 31, Expires: 2005 Estimated average burden hours per response... 0.5

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Shares

or Indirect (I) (Instr. 5)

# **Reporting Owners**

Reporting Owner Name	Relationships						
	Director	10% Owner	Officer	Other			
CHISTE JOHN F C/O SOLITRON DEVICE 3301 ELECTRONICS WA WEST PALM BEACH,Â	ΑY	ÂX	Â	Â	Â		
Signatures							
/s/ John F. Chiste	01/15/2015						
**Signature of Reporting Person	Date						
Explanation of Responses:							

## No securities are beneficially owned

\* If the form is filed by more than one reporting person, *see* Instruction 5(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.