## Edgar Filing: NVIDIA CORP - Form 4

NVIDIA CO	RP										
Form 4											
May 26, 201											
FORM			CECUD			TT 4 N	JOE	COMMERCION	т	OMB APPROVAL	
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer							Expires:	January 31, 2005			
subject to STATEMENT OF CHANGES IN BENEFICIAL O						LOW	NERSHIP OF	Estimated a	Estimated average		
Section 1 Form 4 o		SECURITIES							burden hours per response 0.1		
Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								0.5	
obligation	ns Section	*					C C	f 1935 or Sectio	n		
may cont See Instru	inue.		of the In	•							
1(b).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or T					Ticker or T	rading	g	5. Relationship of Reporting Person(s) to Issuer			
HUDSON DAWN E Symbol Issuer NVIDIA CORP [NVDA]							Issuei				
N				A CORP [	NVDAJ			(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				X Director	100			
C/O NVIDIA 05/21/2				/Day/Year) /2015				_X_ Director10% Owner Officer (give titleOther (specify			
CORPORATION, 2701 SAN			03/21/20	515				below) below)			
TOMAS EX	<b>XPRESSWAY</b>	7									
(Street) 4. If Ame			4. If Ame	endment, Date Original				6. Individual or Joint/Group Filing(Check			
				onth/Day/Year)				Applicable Line)			
_X_Form filed by C							One Reporting Person lore than One Reporting				
SANTA CL	ARA, CA 95	050						Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecurit	ties Acc	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of		Date 2A. Dee		3.			-	5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Y	ear) Execution any	on Date, if Transaction(A) or Disposed of Code (D)				l of	Securities Beneficially	Form: Direct Indirect (D) or Benefi	Indirect Beneficial	
(Month/Day/Year)			(Instr. 8) (Instr. 3, 4 and 5)				Owned	Indirect (I)	Ownership		
				Following Reported	(Instr. 4)	(Instr. 4)					
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	05/21/2015			A	10,283	A	\$ 0 (1)	23,597	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of ) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>						
	Director	10% Owner	Officer	Other		
HUDSON DAWN E C/O NVIDIA CORPORATION 2701 SAN TOMAS EXPRESSWAY SANTA CLARA, CA 95050	X					
Signatures						
/s/ Rebecca Peters, Attorney-in-Fact fo Hudson	Ξ.	05/26/2015				
<u>**</u> Signature of Reporting Person			D	ate		

## **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).

Annual grant in connection with service on the Board of Directors. The shares represent restricted stock units that were received as an award, for no consideration. The restricted stock units shall vest as to 50% of the shares on November 18, 2015 and 50% of the shares on May 18, 2016. If the Reporting Person's service as a director terminates at any time due to death, the grant shall immediately become fully vested.

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.