Pendrell Co	rp										
Form 4											
October 04,	2016										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549							OMB Number:	3235-0287			
Check the check	nger								Expires:	January 31, 2005	
subject to STATEMENT OF CHAN				IGES IN BENEFICIAL OWNI				ERSHIP OF	Estimated a		
	Section 16. SECU				CURITIES				burden hours per		
Form 4 Form 5		suggest to S	action 1	f(a) = f(b)	a Caarrin	ian E	vohonco	A at of $1024$	response	0.5	
obligatio								Act of 1934, 1935 or Section			
may cor	itinue.				t Compan				L		
<i>See</i> Inst 1(b).	ruction	50(11) 0		vestmen	i compu	iy 110	. 01 19 10				
(Print or Type	Responses)										
	Address of Reporting	_		lymbol I				5. Relationship of Reporting Person(s) to Issuer			
KAUSER I	NICOLAS		Symbol								
			Pendrell Corp [PCO]					(Check all applicable)			
(Last)	(First) (				ransaction						
			n/Day/Year)				Officer (give title Other (specify				
2300 CARILLON POINT 09/30				0/2016				below) below)			
			4. If Ame	Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			•				Applicable Line)				
	D. 1114.000000						-	_X_ Form filed by O Form filed by M			
KIRKLAN	D, WA 98033						Ī	Person		porting	
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficial	y Owned	
1.Title of	2. Transaction Date			3.			quired (A)		6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)		Date, if	Transaction Code	oror Dispos (Instr. 3, 4			Securities Beneficially	Ownership Form:	Indirect Beneficial	
(11150.5)		any (Month/Da	v/Year)	(Instr. 8)	(insu: 5, 2	+ anu .	))	Owned	Direct (D)	Ownership	
		,		. ,				Following	or Indirect	(Instr. 4)	
						(A)		Reported Transaction(s)	(I) (Instr. 4)		
						or	<b>D</b> '	(Instr. 3 and 4)	(11150.4)		
Class A				Code V	Amount	(D)	Price \$	,			
Class A Common	10/01/2016	09/30/20	16	А	13,319	А	۵ 0.6851	144,012	D		
Stock $(1)$	10/01/2010	07/50/20	10	Λ	(2)	Α	(1)	177,012	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)

## Edgar Filing: Pendrell Corp - Form 4

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)	ate, if TransactionDerivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy) $\frac{(1)}{(3)}$	\$ 0.691	10/01/2016		A	60,000	10/01/2017	10/01/2026	Class A Common Stock	60,000

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
KAUSER NICOLAS 2300 CARILLON POINT KIRKLAND, WA 98033	Х						
Signatures							
/s/ Timothy M. Dozois, attorney-in-fact	10/04/2016						
**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) The number of shares and price per share reported do not reflect the issuer's 1-for-10 reverse stock split of its Class A and Class B common stock that became effective at 5:00 Pacific time on September 30, 2016.
- (2) Represents pre-reverse split shares issued to the reporting person as compensation for board service provided for the quarter ended September 30, 2016.
- (3) Stock options granted under the Pendrell Corporation 2012 Equity Incentive Plan and pursuant to the Issuer's Board Compensation Policy.

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.