Edgar Filing: AEHR TEST SYSTEMS - Form 4

	I SYSTEMS										
Form 4 November 2	6 2014										
Check th if no long subject to Section 1 Form 4 of Form 5 obligatio may cont <i>See</i> Instru 1(b).	1 4 UNITED is box ger 5 6. or 5 5 5 5 5 5 5 5 5 5 5 5 5	IENT O rsuant to S (a) of the 1	Was F CHAN Section 14 Public Ut	GES IN SECU 6(a) of the ility Ho	h, D.C. 20 I BENEF RITIES he Securit	549 ICIA ies E	L OW xchang Act of	COMMISSION NERSHIP OF e Act of 1934, f 1935 or Section 40	OMB Number: Expires: Estimated a burden hou response	0	
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> FUCCI DAVID			2. Issuer Name and Ticker or Trading Symbol AEHR TEST SYSTEMS [AEHR]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O AEHR KATO TER	TEST SYSTEM	Middle) S, 400	3. Date of (Month/D 11/24/20	ay/Year)	Fransaction			Director X Officer (give below)	10%	Owner er (specify	
Filed(Mo				If Amendment, Date Original led(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
FREMONT	, CA 94539							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		Code (Instr. 8)	4. Securi ion(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	11/24/2014			Р	6,170	A	\$ 2 431	6,170	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)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (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 unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
FUCCI DAVID C/O AEHR TEST SYSTEMS 400 KATO TERRACE FREMONT, CA 94539			V.P. OF OPERATIONS					
Signatures								
Gary L. Larson, Attorney-in-fact	11	/26/2014						
**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).

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.