AEHR TEST SYSTEMS

Form 4

October 02, 2015

FORM 4

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

OMB

Estimated average

Check this box if no longer subject to Section 16.

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

3235-0287 Number: January 31, Expires:

2005

0.5

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

burden hours per response...

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person ** FUCCI DAVID			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer				
		AC 111 \	AEHR TEST SYSTEMS [AEHR]	(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					
C/O AEHR TEST SYSTEMS, 400 KATO TERRACE			(Month/Day/Year) 10/01/2015	Director 10% Owner _X Officer (give title Other (specify below) VP OF OPERATIONS				
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check				
FREMONT, CA 94539			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I. Non Dorland Committee A.					

(City)	(State) (Zip) Tabl	e I - Non-D	erivative Securities Acq	uired, Disposed of	, or Beneficial	y Owned
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transactio	on(A) or Disposed of (D)	Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	(Instr. 3, 4 and 5)	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)		Owned	Indirect (I)	Ownership

(Instr. 3)		any	Code	(Instr. 3,	, 4 and	. 3)	Beneficially	(D) or
		(Month/Day/Year)	(Instr. 8)				Owned	Indirect (I)
							Following	(Instr. 4)
					()		Reported	
					(A)		Transaction(s)	
					or		(Instr. 3 and 4)	
			Code V	Amount	(D)	Price	(
Common	10/01/2015		J	1,243	A	\$	8,717	D
Stock				(1)		1.955		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

(Instr. 4)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
					4, and 5)	Date	Expiration		Amount		
				Code V	(A) (D)	Exercisable	Date	Title	Number of Shares		

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

VP OF OPERATIONS

Signatures

David Fucci 10/02/2015

**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).

These shares have been purchased through the Company's 2006 Employee Stock Purchase Plan, a "tax-conditioned plan" per Internal

(1) Revenue Code Section 423. This purchase is exempt from Section 16 of the Securities Exchange Act of 1934 regarding liabilities arising from six-month short-swing transactions in the Company's securities.

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.

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