#### Edgar Filing: UNGARO PETER J - Form 4

UNGARO I	PETER J									
Form 4	10									
May 03, 20										
FORM		STATES SEC	UDITIES		NCE	COMMISSIO		OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							3235-0287		
Check the			0				Expires:	January 31,		
if no lor subject Section	to SIAIEN	MENT OF CHA	ANGES IN SECU	Estimated burden ho						
Form 4 or							response	•		
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 19401(b).30(h) of the Investment Company Act of 1940										
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> UNGARO PETER J			2. Issuer Name <b>and</b> Ticker or Trading Symbol CRAY INC [CRAY]			5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)			3. Date of Earliest Transaction			(Check all applicable)				
C/O CRAY INC., 901 FIFTH AVENUE,, SUITE 1000			(Month/Day/Year) 05/02/2019			X Director 10% Owner X Officer (give title Other (specify below) below) President & CEO				
(Street)			4. If Amendment, Date Original Filed(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				
SEATTLE	, WA 98164					Person	More than One R	eporung		
(City)	(State)	(Zip) T	able I - Non-	Derivative Secur	rities A	cquired, Disposed	of, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, in any (Month/Day/Year	Code (Instr. 8)	(A) or	) 5)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Price					
Reminder: Re	port on a separate line	e for each class of s	ecurities bene	Persons w information required to	ho res n conta o respo	or indirectly. pond to the colle ained in this form and unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
				number.						

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionDerivative		Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8		Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit (RSU)	<u>(1)</u>	05/02/2019		A		100,000		(2)	(2)	Common Stock	100,000

### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
UNGARO PETER J C/O CRAY INC., 901 FIFTH AVENUE, SUITE 1000 SEATTLE, WA 98164	Х		President & CEO					
<b>Signatures</b> /s/ Michael C. Piraino as attorney-in-fact fo Ungaro		05/03/2019						

<u>\*\*</u>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) Each restricted stock unit represents a contingent right to receive one share of the issuer's Common Stock.
- (2) One-quarter of these shares vest on each of May 2, 2020, May 2, 2021, May 2, 2022, and May 2, 2023 subject to the reporting person's provision of service to the issuer on each vesting date.

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.