INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and A Person <u>*</u> HEARN		porting	2. Date of Event Requiring Statement (Month/Day/Year) 02/01/1983		3. Issuer Name and Ticker or Trading Symbol MICROPAC INDUSTRIES INC [MPAD]				
(Last)	(First)	(Middle)			4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
1409 BRIAF	RHOLLOV	W							
	(Street)				(Check all applicable)		6. Individual or Joint/Group		
GARLAND, TX 75043						XDirector10% Owner OfficerOther (give title below) (specify below)		Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)		Table I - N	Non-Derivat	tive Securiti	es Be	neficially Owned	
1.Title of Secur (Instr. 4)	ity			2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	*	
Micropac Ine \$0.10 par va		nc. Commo	n Stock	3,500		D	Â		
Reminder: Repo owned directly	-		ich class of secu	irities benefici	ially S	EC 1473 (7-02)		
	inforn requii	nation conta red to respo	pond to the c ained in this f and unless the MB control nu	orm are not e form displ					

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership
		Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
		Title	Derivative	Security:	
			Security	Direct (D)	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Addre	SS	Relationships				
		10% Owner	Officer	Other		
HEARN H. KENT 1409 BRIAR HOLLOW GARLAND, TX 75043	ÂX	Â	Â	Â		
Signatures						
/s/ H. Kent 0 Hearn 0	8/08/2012					
<u>**</u> Signature of Reporting Person	Date					

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.