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VILLARREA	AL JOSE H												
Form 4													
March 29, 20	10												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE										OMB APPROVAL			
						NGE (COMMISSION		3235-0287				
Check this	s box		was	nington	I, I	D.C. 205	949			Number:	January 31,		
if no long	er STATEM	έντ οι	CHAN	GES IN BENEFICIAL OWNERSHIP OF						Expires:	2005		
subject to Section 16					SECURITIES					Estimated average			
Form 4 or		SECONTIES							burden hou response	•			
Form 5	Filed purs	uant to S	Section 16	(a) of the	he	Securiti	es Ez	cchang	ge Act of 1934,	103001130	0.0		
obligation	18 Section 17(a)								f 1935 or Sectio	n			
may conti <i>See</i> Instru		30(h)	of the Inv	vestmen	t C	Company	Act	of 19	40				
1(b).													
(Print or Type R	esponses)												
1 Name and A	ddress of Deporting D	arson *	2.1	N 7	1.7	D. 1 C	п 1 [.]		5 Palationship of	f Deporting Der	son(s) to		
1. Name and Address of Reporting Person *2. IssueVILLARREAL JOSE HSymbol				uer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer				
,			-	OI AR	IN	IC IES	RI						
	FIRST SOLAR, INC. [FSLR]						(Check all applicable)						
(Last)				Earliest Transaction					X Director 10% Owner				
C/O FIRST SOLAR, INC., 350 (Month/Da				•					Officer (give title Other (specify				
	HINGTON STRI		05/20/20	10					below)	below)			
SUITE 600													
	(Street)		4. If Amer	dment. D	Date	e Original			6. Individual or J	oint/Group Fili	1g(Check		
· · · · · · · · · · · · · · · · · · ·				onth/Day/Year)					Applicable Line)				
									X Form filed by				
TEMPE, AZ	85281-1244								Form filed by M Person	More than One Re	eporting		
(City)	(State) (A	Zip)	Table	I - Non-	De	rivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	2A. Deer	ned	3.		4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Executio	Code Disposed of (D)						Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/I							Beneficially Owned		Beneficial Ownership		
			Jay/ I Cal)	(Instr. 8) (Instr. 3, 4 and 5)			5)	Following	Instr. 4)	(Instr. 4)			
							(A)		Reported				
							or		Transaction(s) (Instr. 3 and 4)				
2				Code	V	Amount	(D)	Price	(msu. 5 and 4)				
Common Stock	03/26/2010			A <u>(1)</u>		215	А	\$0	1,032	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. tionNumber of) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	7 (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			
VILLARREAL JOSE H C/O FIRST SOLAR, INC. 350 WEST WASHINGTON STREET SUIT TEMPE, AZ 85281-1244	ГЕ 600	Х					
Signatures							
/s/ Peter C. Bartolino, Attorney-in-fact	03/29/20	10					
** 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 shares granted represent the quarterly equity compensation paid to the independent directors.

Remarks:

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Exhibit List - Exhibit 24, Power of Attorney

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.