STEADMAN DAVID RA

Form 4

September 29, 2017

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

3235-0287 Number: January 31,

OMB APPROVAL

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if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

Common

Stock

09/27/2017

(Print or Type Responses)

| 1. Name and A STEADMA | Symbol | 2. Issuer Name and Ticker or Trading Symbol SEVCON, INC. [SEV] | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
|------------------------|---|---|------------------|---|--|----------------------------|-----------------------|--|
| | | | N, INC. [| SEVJ | (Check all applicable) | | | |
| (Last) | (First) (M | fiddle) 3. Date of | Earliest Tr | ansaction | | | | |
| C/O SEVCO | ` | (Month/Day/Year) 09/27/2017 | | | e title 0th below) | | | |
| | 4. If Amer | 4. If Amendment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | |
| SOUTHBO | ` | 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 | e I - Non-D | erivative Securities Acq | quired, Disposed | of, or Beneficial | lly Owned | |
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. Transactio | 4. Securities Acquired on(A) or Disposed of | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect | |
| (Instr. 3) | (· · · · · · · · · · · · · · · · · · · | any | Code | (D) | Beneficially | (D) or | Beneficial | |
| , | | (Month/Day/Year) | (Instr. 8) | ` ' | Owned Following | Indirect (I) (Instr. 4) | Ownership (Instr. 4) | |

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

D

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.

Reported

Transaction(s)

(Instr. 3 and 4)

D

(A)

or

(D)

Amount

46,500

Price

(1)

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

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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. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | |
|---|---|---|---|---------------------------------------|---|-------|--|--------------------|---|--|--|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Series A Convertible Preferred Stock | \$ 8 | 09/27/2017 | | D | | 1,000 | 09/08/2014 | (2) | Common Stock | 3,000 | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | |
|---|---------------|-----------|---------|-------|--|
| 1 0 | Director | 10% Owner | Officer | Other | |
| STEADMAN DAVID RA C/O SEVCON, INC. 155 NORTHBORO ROAD SOUTHBOROUGH, MA 01772 | X | | | | |

Signatures

/s/ Matthew C. Dallett at attorney-in-fact 09/29/2017

**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) Disposed of pursuant to merger agreement by and among Issuer, BorgWarner Inc. and Slade Merger Sub Inc. for a cash payment of the per share price noted.
- (2) The Series A Convertible Preferred Stock had no expiration 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.

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