Edgar Filing: ILLUMINA INC - Form 4

ILLUMINA I	INC											
Form 4												
January 02, 2	014											
FORM	4									OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check this box								Expires:	January 31,			
if no longe subject to	STATEN	MENT O	F CHAN			CIA	LOW	NERSHIP OF	Estimated a	2005 average		
Section 16	5 .			SECUR	ITIES				burden hours per response 0.!			
Form 4 or						_						
Form 5 obligation	~ ^							ge Act of 1934,				
may contin				•	•	- ·		f 1935 or Sectio	n			
See Instru	ction	30(h)	of the Inv	vestment	Company	y Act	of 19	40				
1(b).												
(Print or Type R	esponses)											
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and [*]				Ticker or Trading 5.			5. Relationship of	5. Relationship of Reporting Person(s) to				
MOELLER (GERALD		Symbol					Issuer				
ILLUM				INA INC	[ILMN]			(Check all applicable)				
(Last) (First) (Middle) 3. Date			3. Date of	Earliest Tra	ansaction			(Check an applicable)				
(Month/			(Month/Da	onth/Day/Year)				X Director 10% Owner				
			12/31/20	-				Officer (give title Other (specify below) below)				
				ndment, Dat	-			6. Individual or Joint/Group Filing(Check				
			Filed(Mont	th/Day/Year)				Applicable Line) _X_ Form filed by (One Reporting Pa	erson		
SAN DIEGO), CA 92122							Form filed by M	Nore than One Re			
								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Da		e 2A. Deemed		4. Securi			5. Amount of	6. Ownership			
Security	(Month/Day/Year	on Date, if TransactionAcquired (A) or						Form: Direct	Indirect			
(Instr. 3)		Day/Year)	Code (Instr. 8)	Disposed of (D) (Instr. 3, 4 and 5)			•	(D) or Indirect (I)	Beneficial Ownership			
		(WIOIIII)	Day/Teal)	(11150.0)	(11150. 5,	4 anu	3)	Following	(Instr. 4)	(Instr. 4)		
						(1)		Reported	× ,	. ,		
						(A) or		Transaction(s)				
				Code V	Amount		Price	(Instr. 3 and 4)				
Common Stock	12/31/2013			А	166 <u>(1)</u>	А	\$0	14,620	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)

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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)	4. Transact Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,				7. Titl Amou Under Secur (Instr.	int of rlying	Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	4, an 7 (A)	ĺ.	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
I O	Director	10% Owner	Officer	Other				
MOELLER GERALD 5200 ILLUMINA WAY SAN DIEGO, CA 92122	Х							
Signatures								
By: Scott M. Davies For: Gera Moeller	ld	01/02/2014						
<u>**</u> Signature of Reporting Person		Da	te					

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).

Dr. Moeller elected to receive 100% of his 2013 board and committee cash retainer fees in Illumina common stock. The number of shares
 (1) issued in lieu of cash is fixed at the end of each calendar quarter based on the weighted average closing price of Illumina common stock during such calendar quarter. The amount reported on this Form represents Dr. Moeller's fourth quarter 2013 retainer fees.

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.