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Broadcom L Form 4	td											
February 18,	2016											
FORM 4 UNITED STATES SECURITIES AND						сна	NGE (OMMISSION				
	Check this box Washington, D.C. 20549								OMB Number:	3235-0287		
Check th if no long							Expires:	January 31, 2005				
subject to Section 1 Form 4 o Form 5	6. r	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 193								Estimated average burden hours per response 0.		
obligatio may cont See Instru 1(b).	ns Section	17(a) of the	Public U		ling Con	npan	y Act of	1935 or Section	1			
(Print or Type I	Responses)											
1. Name and A Maslowski	address of Report Anthony E.	ing Person <u>*</u>	Symbol	r Name and om Ltd [A		Tradi	ng	5. Relationship of Issuer	Reporting Pers	son(s) to		
(Lost)	(First)	(Middle)		-	-			(Check	k all applicable	:)		
				of Earliest Transaction Day/Year) 2016				Director 10% Owner Officer (give title Other (specify below) below) below) SVP & Chief Financial Officer				
				ndment, Date Original hth/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 Person 				
(City)	(State)	(Zip)	Tabl	o L. Non D	animatina	See	ition A on		on Donoficial	ly Owned		
1.Title of Security (Instr. 3)	× ,	ansaction Date 2A. Deemed		(A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	aount of 6. Ownership 7. Naturities Form: Direct Indirect ficially (D) or Benefic d Indirect (I) Owners wing (Instr. 4) (Instr. 4 ted action(s)			
Ordinary Shares, no par value	02/17/2016			M <u>(1)</u>	5,000	(D) A	Price \$ 39.25	66,917 <u>(2)</u>	D			
Ordinary Shares, no par value	02/17/2016			S <u>(1)</u>	5,000	D	\$ 127	61,917 <u>(2)</u>	D			
Ordinary Shares, no par value								14,237	I	See Footnote (3)		

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)	ecurity or Exercise (Month/Day/Year) Exe any		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number orof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day	Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (In:		
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Stock Option (Right to Buy)	\$ 39.25	02/17/2016		M <u>(1)</u>	5,000	<u>(4)</u>	09/10/2020	Ordinary Shares, no par value	5,000			
Reporting Owners												
Reporting Owner Name / Address				Relationships								
			Director	10% Owner Officer				Other				
C/O AVA 1320 RID	ki Anthony LGO TECH DER PARE E, CA 9513	NOLOGIES US I K DRIVE	NC.	SVP & Chief Financial Officer								
Signa	tures											
		ll, Attorney-in-Fa	et for Anthony E									
Maslowsk				02/18/2016								
	Signature of Reporting F	erson	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) Transaction made pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.
- (2) Includes 61,917 Restricted Share Units.
- (3) The shares are held by The Anthony E. Maslowski Trust dated May 20, 2011 for which the Reporting Person serves as trustee.
- (4) Share price performance option (the "Option") granted pursuant to the Avago Technologies Limited 2009 Equity Incentive Award Plan. The Option vests over four years, with 25% vesting on each anniversary of the date of grant, such that the Option will be fully vested on

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September 11, 2017. The exercisability requirements for the Option have been met.

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.