

Reported by ANDRESON JEFF

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/24/14 for the Period Ending 02/20/14

Address 3560 BASSETT STREET

SANTA CLARA, CA, 95054

Telephone 4089869888

CIK 0001001902

Symbol IVAC

SIC Code 3559 - Special Industry Machinery, Not Elsewhere Classified

Industry Industrial Machinery & Equipment

Sector Industrials

Fiscal Year 12/31



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person *					Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Andreson Jeff					INTEVAC INC [IVAC]									Director		10	% Owner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)									X _ Officer (give title below) Other (specify below EVP Finance & Administration.				fy below)
3560 BASSETT STREET						2/20/2014									& Admi	nistration,		
(Street)						4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)				
SANTA CLARA, CA 95054													_	X Form filed by One Reporting Person				
(City) (State) (Zip)														Form filed by More than One Reporting Person				
			Table I -	Non-Dei	ivat	ive Secu	ıritie	s Ac	quire	ed, D	isposed	of, or B	Benef	icially Owne	ed			
1. Title of Security (Instr. 3) 2. Trans. D				Frans. Date	Exec			Instr. 8)			or Disposed of (D)						Beneficial	
							Co	de	V	Amou	(A) o	r Price						Ownership (Instr. 4)
	Tab	le II - Deri	vative Se	curities]	Bene	eficially	Own	ed (e.g. ,	puts	, calls, v	arrant	ts, op	tions, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)		3. Trans. Date	3A. Deeme Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Secur Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5		Expiration Expiration (in the content of the conten				7. Title a Securitie Derivati (Instr. 3	es Und ive Sec	erlying urity		9. Number of derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)		(D)		isable	Expiration Date	Title	N	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Restricted Stock Units	\$0.0	2/20/2014		A		20000.0	0		5/15/2 (1		<u>(2)</u>	Comm Stock	-	20000	\$0.0	24687	D	

Explanation of Responses:

- (1) These are restricted stock units awarded to the Reporting Person and each restricted stock unit represents a contingent right to receive one share of IVAC common stock. The restricted stock units vest in two equal installments upon the Reporting Person's completion of each year of service over the two-year period measured from the vesting commencement date.
- (2) Vested shares will be delivered to the Reporting Person as soon as possible after each vesting date.

Reporting Owners

Paperting Owner Name / Address	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
Andreson Jeff										
3560 BASSETT STREET			EVP Finance & Administration,							
SANTA CLARA, CA 95054										

Signatures

By: Kevin Soulsby For: Jeffrey Andreson

**Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.