

☐ 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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

| 1. Name and Address of Reporting Person * | | | | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|--|------------|---------|-------------|---|--|-----------|------------------------------|---|---|-----------------------|--|---|--|------------------------------------|--|------------|--|
| Barber Kevin D | | | | | INTEVAC INC [IVAC] | | | | | | | | | | | | |
| (Last) (First) (Middle) | | | | 3. | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | X_ Director | | | | | | |
| | | | | | | | | | | | Officer (giv | Officer (give title below) Other (specify below) | | | | | |
| 3560 BASSETT STREET | | | | | | 5/18/2023 | | | | | | | | | | | |
| (Street) | | | | 4. | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | | | | | | Y) 6. Individual | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| SANTA CLARA, CA 95054 | | | | | | | | | | | | X _ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (C | ity) (Stat | e) (Zip | p) | R | ule 10 |)b5-1(c) | Transactio | n In | dication | on | | | | | | | |
| | | | | | ☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan | | | | | | | | | | | | |
| | | | | th | that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Trans. Date | | | 3. Trans. Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | V | Amou | (A) o | r Pri | ce | | | or Indirect (I) (Instr. 4) | (Instr. 4) | |
| Common Stock 5/18/202 | | | | 5/18/2023 | | | A | | 12000 | (<u>1</u>) A | \$0. | 0 | 56000 | | D | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| | | | n (Instr. 8 | ans. Code r. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | and Expiration Date Secu Deri (Inst | | | e and Amount of ties Underlying ative Security 3 and 4) | Security (Instr. 5) B O Fo | 9. Number of derivative Securities Beneficially Owned Following Reported | Ownership Form of Derivative | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | V | (A) | (D) | Date Exer | cisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | | |

Explanation of Responses:

(1) Each share of IVAC common stock is represented by a restricted stock unit ("RSU"). The RSUs vest upon the Reporting Person's completion of one year of service measured from the vesting commencement date.

Reporting Owners

| | Panorting Owner Name / Address | Relationships | | | | | | |
|---|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| | Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| ſ | Barber Kevin D | | | | | | | |
| ١ | 3560 BASSETT STREET | X | | | | | | |
| | SANTA CLARA, CA 95054 | | | | | | | |

Signatures

By: Diane Garibaldi For: Kevin Barber

**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.