## Edgar Filing: AVER CAROLYN V - Form 4

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Form 4	ULIN V										
November 17	7, 2011										
FORM	14								-	PPROVAL	
	UNITE	DSTATES		shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 o	<b>STATE</b> 6.	EMENT O	F CHAN	GES IN SECUR	Expires: January 3 20 Estimated average burden hours per response 0						
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 1	7(a) of the	Public Ut		ling Com	pany	Act of	e Act of 1934, f 1935 or Section 40	n		
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> AVER CAROLYN V			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
(Lost)	(First)	(Middla)	HARMONIC INC [HLIT]					(Chec	Check all applicable)		
			3. Date of Earliest Transaction (Month/Day/Year) 11/15/2011					Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer			
				ndment, Da 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			
(City)	(State)	(Zip)						Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	med on Date, if Day/Year)	4. Securit on(A) or Dia (Instr. 3, 4	sposed	of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	11/15/2011			A <u>(1)</u>	13,750	А	\$0	31,163	D		
Common Stock	11/15/2011			F <u>(2)</u>	5,043	D	\$ 5.46	26,120	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.

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 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	<ul> <li>5. Number of action Derivative Securities</li> <li>8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)</li> </ul>		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
Restricted Stock Units	\$ 0	11/15/2011		М		13,750	05/15/2011	05/15/2014	Common Stock	13,750

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
AVER CAROLYN V 4300 NORTH FIRST STREET SAN JOSE, CA 95134			Chief Financial Officer					
Signatures								
/s/ Laura Donovan. By Attorney- Donovan	-in-Fact L	aura	11/17/2011					
**Signature of Reporting P	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) These shares of common stock were acquired upon the vesting of restricted stock units on 11/15/2011. These restricted stock units were initially granted to the Reporting Person on 6/1/2010, and were identified on a Form 4 filed by the Reporting Person on 6/3/2010.
- (2) Shares of Harmonic Inc. common stock withheld by Harmonic Inc. to satisfy tax withholding obligation upon vesting of restricted stock units.

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.