

# UQM TECHNOLOGIES INC

Reported by  
**ROSENTHAL DAVID**

## FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 07/16/18 for the Period Ending 07/12/18

Address	4120 SPECIALTY PLACE LONGMONT, CO, 80504
Telephone	3036824900
CIK	0000315449
SIC Code	3679 - Electronic Components, Not Elsewhere Classified
Industry	Heavy Electrical 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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

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 *	2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
<b>ROSENTHAL DAVID</b>	<b>UQM TECHNOLOGIES INC [ UQM ]</b>	<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)
(Last) (First) (Middle) <b>C/O SAN HOLDINGS, INC., 9800 PYRAMID COURT, SUITE 130</b>	3. Date of Earliest Transaction (MM/DD/YYYY)  <b>7/12/2018</b>	<b>Treasurer and Secretary</b>
(Street) <b>ENGLEWOOD, CO 80112</b> (City) (State) (Zip)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)  <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Trans. Date	2A. Deemed Execution Date, if any	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)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
common stock	7/12/2018		F		2501 (1)	D	\$0.97	86254	D	

## Table II - Derivative Securities 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. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
call options	(2)	7/12/2018		P		0		(2)	(2)	common stock	441147	(2)	441147	D

### Explanation of Responses:

- (1) Payment of tax liability by withholding securities incident to the vesting of a security issued in accordance with rule 16b-3.
- (2) Various

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
<b>ROSENTHAL DAVID</b> <b>C/O SAN HOLDINGS, INC.,</b> <b>9800 PYRAMID COURT, SUITE 130</b> <b>ENGLEWOOD, CO 80112</b>			<b>Treasurer and Secretary</b>	

## Signatures

David Rosenthal

**7/16/2018**

**\*\*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.