SELIGSOHN SHERWIN I

Form 4

January 16, 2018

FORM 4

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Estimated average burden hours per response... 0.5

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See Instruction

1(b).

(Print or Type Responses)

1 Name and Address of Departing De

1. Name and Address of Reporting Person * SELIGSOHN SHERWIN I		2. Issuer Name and Ticker or Trading Symbol UNIVERSAL DISPLAY CORP \PA\				5. Relationship of Reporting Person(s) to Issuer						
				[OLED]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)					_X_ Director _X_ Officer (given	6 Owner er (specify			
C/O UNIVERSAL DISPLAY			12/26/2017				below) below) Chairman of Board and Founder					
BLVD.	ΓΙΟΝ, 375 PH	ILLIPS										
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line)						
Filed(Month				itn/Day/Year)				_X_ Form filed by One Reporting Person				
EWING, NJ 08618									Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securit	ties Acq	quired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Executi	emed on Date, if /Day/Year)	Code (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	12/26/2017			G	12,051	D	\$0	143,119	D			
Common Stock	12/28/2017			G	1,150	D	\$ 0	141,969	D			
Common Stock	01/12/2018			S	50,000 (1)	D	\$ 200	91,969	D			
Common Stock								21,000 (2)	I	By Trust		
								136,000 (3)	I	By Corp.		

Common Stock

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

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(9-02)

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)	4. Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D)		ate	Amou Under Secur	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
copyring o mar rumo, rumoss	Director	10% Owner	Officer	Other		
SELIGSOHN SHERWIN I C/O UNIVERSAL DISPLAY CORPORATION 375 PHILLIPS BLVD. EWING, NJ 08618	X		Chairman of Board and Founder			

Signatures

/s/ Sidney D. Rosenblatt (by power of attorney) 01/16/2018 **Signature of Reporting Person 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 were sold pursuant to a Rule 10b5-1 Non-Discretionary Trading Plan previously entered into by Mr. Seligsohn.
- (2) The Seligsohn Foundation, of which Mr. Seligsohn is the sole trustee.
- (3) American Biomimetics Corporation, of which Mr. Seligsohn is the sole Director, Chairman, President and Secretary.

Reporting Owners 2

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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.