XILINX INC Form 4 July 02, 2015

FORM 4

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

OMB APPROVAL OMB 3235-0287

Number: Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

5. Relationship of Reporting Person(s) to

Issuer

if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

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

2. Issuer Name and Ticker or Trading

Symbol

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

1(b).

Tong Vincent

(Print or Type Responses)

1. Name and Address of Reporting Person *

See Instruction

			XILINX I	XILINX INC [XLNX]				(Check all applicable)				
(Last) (First) (Middle) 2100 LOGIC DRIVE				(Month/Day	3. Date of Earliest Transaction (Month/Day/Year) 07/01/2015				Director 10% Owner Officer (give title Other (specify below) SVP Worldwide Quality			
(Street) SAN JOSE, CA 95124					Filed(Month/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 Person			
	(City)	(State)	(Zip)	Table I	. Non-Dei	rivative Se	curitie		ired, Disposed of	or Reneficiall	v Owned	
5	1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	Year) E a		3.	4. Securit or(A) or Dis (Instr. 3, 4	ies Ace	quired of (D)	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	
(XLNX COMMON STOCK	07/01/2015			M	12,187 (1)	A	\$0	50,733	D		
(XLNX COMMON STOCK	07/01/2015			M	5,636 (1)	A	\$0	56,369	D		
(XLNX COMMON STOCK	07/01/2015			F	4,923	D	\$ 44.1	51,446	D		
	XLNX COMMON	07/01/2015			F	2,119	D	\$ 44.1	49,327	D		

STOCK

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.

SEC 1474

(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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of actionDerivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securition (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am or Nu of S
Restricted Stock Unit	\$ 0	07/01/2015		M		12,187	07/01/2014	07/01/2016(2)	XLNX COMMON STOCK	12
Restricted Stock Unit	\$ 0	07/01/2015		M		5,636	07/01/2015	07/01/2017(2)	XLNX COMMON STOCK	5,

Reporting Owners

Reporting Owner Name / Address	Relationships
reporting owner runner runaress	

Director 10% Owner Officer Other

Tong Vincent

2100 LOGIC DRIVE SVP Worldwide Quality

SAN JOSE, CA 95124

Signatures

Vincent Tong 07/01/2015

**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) This report reflects the settlement of previously issued restricted stock units. Each restricted stock unit represents a right to receive one share of Xilinx common stock.

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Subject to the continued employment of the reporting person through the applicable vesting date, the restricted stock units will vest in three substantially equal installments and be settled on each of the first three anniversaries of the date of grant through the expiration date indicated. Date Exercisable refers to the initial grant vesting date.

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.