

KOPIN CORP

Reported by **PRESZ MICHAEL**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/18/15 for the Period Ending 02/13/15

Address 125 NORTH DRIVE

WESTBOROUGH, MA 01581

Telephone 508-870-5959

CIK 0000771266

Symbol KOPN

SIC Code 3674 - Semiconductors and Related Devices

Industry Semiconductors

Sector Technology

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).

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 *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Presz Michael					KOPIN CORP [KOPN]												
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Direct	or	_	10% O	vner		
											X _ Officer (give title below) Other (specify						
C/O KOPIN CORPORATION, 125													below) VP Special Projects and Gov't				
NORTH DRIVE												, r speen	ar r rojec	is una Go			
(Street)				4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)						
WESTBOROUGH, MA 01581																	
(City) (State) (Zip)											X Form filed by One Reporting Person Form filed by More than One Reporting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1 777 1		Tan	oie i - Noi	-		1				_	sea o					L	5 XX :
				. Trans. Oate	2A. Deemed Execution Date, if	3. Trans. Code Acquired Disposec (Instr. 8)			l (A) or Follow (Instr.		ount of Securities Beneficially Owned ving Reported Transaction(s) 3 and 4)			Ownership Form: Direct (D)	Beneficial Ownership		
						any	Code	v	Amount	(A) or (D)	Price	:				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock 2					2/13/2015		A		45000 (1)	A	\$0.00		289163			D	
Common Stock 2.				2/13/2015		A		25000 (2)	A	\$0.00		314163		D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivate Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Trans. Date Execution Date, if any Code (Instr. any)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date Date Expiration			Sec De (In	7. Title and Amoun Securities Underly Derivative Security (Instr. 3 and 4) Title Amount or N		ying ty	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported Transaction	Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	V (A)	(D)	Exercisab			Tit	le Sha				(s) (Instr. 4)		

Explanation of Responses:

- (1) Restricted stock vests 25% on each of the four successive December 10 dates following the date of grant (2/13/15) and are subject to restrictions pursuant to the terms of the Issuer's 2010 Equity Incentive Plan.
- (2) 25,000 shares of restricted stock will vest upon the Company either delivering certain products for a program or being awarded an order for certain products with a value exceeding \$2,000,000 for another program, in either case by 12/10/15.

Reporting Owners

Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% (Owner	Officer	Other				
Presz Michael C/O KOPIN CORPORATION 125 NORTH DRIVE WESTBOROUGH, MA 01581				VP Special Projects and Gov't					

/s/ John J. Concannon, as Attorney-in-fact

2/13/2015

** 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.