FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT OF CHANGES IN BENEFICIAL OWNER | SHIP |
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| - | OIVID APPROVAL | | | | | | | | | |
|---|----------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| | Estimated average bu | ırden | | | | | | | | |
| | hours per response: | 0.5 | | | | | | | | |

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Billerbeck Darin G | | | | | 2. Issuer Name and Ticker or Trading Symbol EVERSPIN TECHNOLOGIES INC [MRAM | | | | | | M Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|--|--|---|--------------------------------|--|--------|---|---------------|---|--|--|---|---|---|---------------------------------------|--|--|
| Differbeck Darin G | | | | - 11 | 1 | | | | | | | 7 | Director | f | | 10% Ow | ner |
| (Last) | (Firs | st) (N | /liddle) | | | | | | | | _ | Officer (below) | (give title | | Other (sp below) | ecify | |
| C/O EVERSPIN TECHNOLOGIES, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/20/2018 | | | | | | | | | | | | |
| 5670 W. CHANDLER BOULEVARD, SUITE 100 | | | | | 0/20 | ,, 201 | | | | | | | | | | | |
| 5070 W. GIRRADER BOOLE VIRED, SOITE 100 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. In | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | | | | | , | | | | | | | _ I _ ' | Line) X Form filed by One Reporting Person | | | | |
| CHANDLER AZ 85226 | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (Sta | te) (Z | Ľip) | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution (ay/Year) if any | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5) | | d (A) or r. 3, 4 and | 5. Amoun Securities Beneficia Owned Fo | es For ally (D) Following (I) (I | | m: Direct or Indirect Instr. 4) | 7. Nature of ndirect Beneficial Ownership | |
| | | | | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | nstr. 4) | | | |
| | 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 | ercise (Month/Day/Year) of ative | 3A. Deemed Execution Date, if any (Month/Day/Yea | Date, Transactio Code (Inst | | | on of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | i ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Cod | le V | , | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Nonqualified Stock Option (Right to Buy) | \$8.52 | 08/20/2018 | | A | | | 30,000 | | (1) | 08/19/2028 | Common Stock | 30,000 | \$0.00 | 30,000 |) | D | |

Explanation of Responses:

1. 1/36th of the shares subject to the option vest in successive equal monthly installments measured from August 20, 2018.

Remarks:

/s/ Jeffrey Winzeler, Attorney-

in-Fact

<u>08/22/2018</u>

** 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 Number.