## Edgar Filing: Dean Alison - Form 4

Dean Alison													
Form 4													
July 27, 2011	l												
FORM	4		an au				~~~			OMB AF	PROVAL		
	UNITED	STATES		RITIES shingtoi				NGE C	OMMISSION	OMB Number:	3235-0287		
Check thi										Expires:	January 31,		
if no longer subject to STATEMENT OF CHANG					GES IN BENEFICIAL OWNERSHIP					Estimated a	2005 verage		
	Section 16. SECURIT					TIES			burden hours per				
Form 4 or Form 5	Form 4 or								response	0.5			
obligation	<b>1</b> 0							•	e Act of 1934,				
See Instruction See Instructio													
See Instru	iction	30(n)	of the In	vestmer	nc	Jompan	y Ac	t 01 194	0				
1(b).													
(Print or Type R	Responses)												
	•												
1. Name and A	ddress of Reporting F	Person <sup>*</sup>	2. Issuer	Name ar	nd 🛛	Ficker or	Tradir	ıg	5. Relationship of	Reporting Person(s) to			
Dean Alison	l		Symbol	C					Issuer				
				OT CORP [IRBT]					(Check all applicable)				
(Last) (First) (Middle) 3. Date of				f Earliest Transaction					(Check an applicable)				
				Day/Year)					Director 10% Owner				
C/O IROBOT CORPORATION, 8 07/27/20				-					Officer (give title Other (specify below) below)				
CROSBY DRIVE									SVP, Corporate Finance				
	(Street)		4 If Ame	ndment I	Date	- Original				-			
			.mendment, Date Original Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)					
I neu(ivoir				niv Day, Tear)					_X_ Form filed by One Reporting Person				
BEDFORD,	MA 01730								Form filed by M Person	lore than One Re	porting		
(City)	(State) (	(Zip)											
(City)	(State) (	(Zip)	Tabl	e I - Non	-De	rivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date			3.		4. Securi			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)	Execution any	n Date, 1f	Transac Code		(A) or Di (Instr. 3	•		Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(1130.3)		(Month/I	Code (Instr. 3, 4 and 5) (Instr. 8)				5)	Owned	Indirect (I)	Ownership			
			-						Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported Transaction(s)				
							or		(Instr. 3 and 4)				
Common				Code	V	Amount	(D)	Price ¢	. ,				
Common Stock	07/27/2011			F <u>(1)</u>		133	D	\$ 34.51	11,013	D			

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Dean Alison C/O IROBOT CORPORATION 8 CROSBY DRIVE BEDFORD, MA 01730			SVP, Corporate Finance					
Signatures								
/s/ Glen D. Weinstein, Attorney-in-Fact		07/27/201						
**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) Consists of shares withheld by iRobot Corporation in order to satisfy the minimum tax withholding obligation of the reporting person.

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.