FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-02							

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

87 Estimated average burden hours per response: 0.5

					or Sec	นอก 30	o(ii) oi tile i	nvesime	ni Coi	npany Act o	11940								
1. Name and Address of Reporting Person* POPIELEC MICHAEL D					2. Issuer Name and Ticker or Trading Symbol ULTRALIFE CORP [ ULBI ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)					
										-			X	Director			10% Ow	ner	
(Last)	(F	irst)		3. Date of Earliest Transaction (Month/Day/Year)								- X	Officer ( below)	give title		Other (s below)	pecify		
ULTRALIFE CORPORATION					01/01/2015								President and CEO						
2000 TE	CHNOLOG	SY PARKWAY																	
					4. If Amendment, Date of Original Filed (Month/Day/Year)								6 Inc	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					II 7 UII	CHAIR	one, Date of	Origina	i iicu	(Monan Day	, rear,		Line)		ли Стоар	· iiiig	(Oncorripp	ioabic	
NEWAR	K N	Y	14513										) X	Form fil	ed by One	Repoi	rting Person		
															ed by More	e than	One Report	ing	
(City)	(S	tate)	(Zip)		Person														
		Ta	ble I - Nor	n-Deriva	tive S	ecur	ities Acc	quired,	Dis	posed of	, or B	ene	ficially	Owned					
1. Title of Security (Instr. 3)  2. Trans Date (Month/					Execu Day/Year) if any		eemed ution Date, th/Day/Year)	3. Transaction Code (Instr. 8)  4. Securities Acquii Disposed Of (D) (In				5. Amount of Securities Beneficially Owned Following Reported		Form:	: Direct I Indirect E str. 4) (	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A)	or	Price	Transacti (Instr. 3 a	on(s)			msu. 4)	
Common Stock; \$.10 par value 01/01/					1/2015		М		17,361 <sup>(1)</sup> A		A	\$0	221,141			D			
			Table II -							osed of, convertib				Owned					
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/Yea	Code (Instr				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
				Cod	le V	(A)	(D)	Date Exercisa	able	Expiration Date	Title	N O	Amount or Jumber of Shares		Transaction (Instr. 4)	on(s)			
Restricted Stock	\$0	01/01/2015		J <sup>(1</sup>	)		12,639 <sup>(1)</sup>	01/01/2	015	12/30/2020	Comm		30,000	\$0	60,00	0	D		

## **Explanation of Responses:**

1. Represents the conversion of 30,000 restricted stock units previously awarded to Michael D. Popielec on June 4, 2013 upon the vesting of such restricted stock units on January 1, 2015. The Company retained 12,639 of the 30,000 shares of common stock issuable to Michael D. Popielec in satisfaction of his individual minimum statutory tax withholding obligation at a price per share determined as of the vesting date.

## Remarks:

01/05/2015 Michael D. Popielec

\*\* Signature of Reporting Person Date

Stock

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

- $^{\star}$  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.