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SIMTEK CORP Form 4 April 02, 2003

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U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

[] Check this box if

no longer Subject Filed pursuant to Section 16(a) of the Securities Exchange Act of 19 to Section 16. Section 17(a) of the Public Utility Holding Company Act of 1935 Section 30(f) of the Investment Company Act 1940

					J(I) (or the thy			any ACC 19	40 		
1.Name and Address o	f Reporting	Person*	 2.Is	ssuer	Name	and Ticke	r or Tr	ading	Symbol	6.Rela Issu		
 Mitchell 	Mitchell Douglas M.			Simtek Corporation (SRAM) 								
 (Last) 205 Ridge Dr.					of Re	ication eporting an entity	1		 / X Off (gi CEO			
(Stre (Stre 												
Woodland Park	CO	80863					Ī			Re		
 (City) 	(State)	(Zip)		TABI	LE I	- Non-Deri	vative	Secur	ities Acqu	ired, Disp		
 1.Title of Security (Instr. 3) 	Transact- ion Date (Mo/Day/ Yr)	Execution	any		ed of (D) 3, 4 & 5)		5.Amount Securit Benefic Owned a Month (Instr.					
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Reminder: Report on a separate line for each class securities owned directly or indirectly. *If the form is filed by more than one reporting person, see Instruction 4(b)(v).

FORM 4 (continued) TABLE II - Derivative Securities Acquired, Disposed of, Beneficially (e.g., puts, calls, warrants, options, convertible security)

				(e.	· g · ,]	puls, Call: 	s, warrant:	s, opti	ons, col	nvertible s	ty)
Title of Derivative Security (Instr. 3) 	Conver- sion or Exer-	Date (Mon/ Day Year) 	Deemed Execu- tion	Trans- action Code (Instr.8)		Securitie: Acquired or Dispose	 Date Exercisable and Expiration		7. Title and Amount of Underlying Securities (Instr. 3 and 4) 		
	ative Secur- ity	İ	 	 Code	V			Exbl.		Title	Amount or Number of Shares
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Explanation of Responses:

**Intentional misstatements or omissions of facts constitute Federal /s/ Douglas Mitche Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

**Signature of

Note: File three copies of this form, one of which must be manually signed. Douglas Mitchell If space provided is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are required to respond unless the form displays a currently valid OMD Number