

Kovar Pavel
Form 3
January 29, 2013

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Kovar Pavel		(Month/Day/Year)	TIVO INC [TIVO]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		01/24/2013		
2160 GOLD STREET			(Check all applicable)	
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Principal Accounting Officer	
ALVISO, CA 95002			6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	66,332 ⁽¹⁾	D	

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

Edgar Filing: Kovar Pavel - Form 3

				Shares		(I) (Instr. 5)	
Incentive Stock Option (right to buy)	08/01/2010 ⁽²⁾	06/29/2017	Common Stock	2,813 ⁽³⁾	\$ 7.38	D	Â
Incentive Stock Option (right to buy)	08/26/2010 ⁽⁴⁾	07/26/2017	Common Stock	5,938 ⁽⁵⁾	\$ 9.18	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Kovar Pavel 2160 GOLD STREET ALVISO, CA 95002	Â	Â	Â Principal Accounting Officer	Â

Signatures

By: Attorney-in-fact Sheryl Andersen For: Pavel
Kovar

01/29/2013

__Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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).

- This is comprised of 2,666 unvested Restricted Stock Units granted on 2/17/09 which will vest on 2/17/13; 6,666 unvested Restricted Stock Awards granted on 3/26/10 of which 3,333 shares will vest on 3/26/13 and 3/26/14; 12,000 Restricted Stock Awards granted on 2/22/11 of which 4,000 shares will vest on 3/15/13, 9/15/13 and 3/15/14; 45,000 Restricted Stock Awards granted on 4/3/12 of which 9,000 shares will vest on 3/15/13, 9/15/13, 3/15/14, 9/15/14 and 3/15/15.
- (1) This option was granted on 6/30/10 and vests 1/48 for 48 months beginning on 8/1/10.
 - (2) This option consists of 2,813 shares that have not yet vested.
 - (3) This option was granted on 7/26/10 and vests 1/48 for 48 months beginning on 8/26/10.
 - (4) This option consists of 313 shares that are vested and exercisable and 5,625 shares that have not yet vested.

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.